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ABSTRACT

This curriculum model defines competencies for child welfare supervisors to provide effective services to Indian children and families in Indian communities, on and off federal reservations. The results of a survey of 100 state and tribal child welfare supervisors were used to design the curriculum. The preface (Ann E. MacEachron) contains a historical perspective of the Indian Child Welfare Act and presents results of the survey of child welfare supervisors. Chapter 1, "Comprehensive Child Welfare System" (Michael D. Hughes), presents an orientation to tribal government, casework supervision, and administrative supervision. Chapter 2, "Family Practice in the Native American Community" (Anne Szulgit), highlights how family practice in the Native American community differs in terms of values, the concept of time, group consensus, cooperation, and styles of communication. Chapter 3, "Case Management" (Lorena Naseyowma), discusses decision-making, the role of the case manager, and case management skills. Chapter 4, "Management Skills: Grants, Contracts" (Margaret J. Allen), provides background and activities in proposal development, interagency coordination, contract negotiation, contract management, and reporting. Chapter 5, "Management" (Robert R. Lewis and Timothy A. Perry), discusses the basic components of management such as planning, budgeting, organizing, staffing, and directing, as well as leadership, organization, and ethics. Chapter 6, "Supervision" (Donald F. Fausel and Linda Tiller), focuses on the skills needed for effective supervision and for surviving the stress of becoming and enduring as a supervisor. (KS)

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COLLABORATION II: THE SUPERVISOR

Defining Competencies for Supervisors in Public Child Welfare Practice Serving Indian Communities

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Clown

The illustrations for this training manual are taken from Hopi tribal culture, using a popular and universal character, the clown. The choice of the clown as a figure for illustrating the training manual is deliberate, and it is an appropriate choice because, for the Hopi, the clown is a serious, respected ritual and ceremonial expression of remembrance and celebration of life journey, passages and guiding wisdom. The way that the Hopi culture uses the clown can be compared, in one way, to that in which the greatest of Western dramatists, Shakespeare, used the clown figure in his plays, to remind by clever wit and outrageous behavior his monarch patrons, and their subjects, of human flaws and pretensions. Although the clown, for the Hopi, serves several other functions, the one noted compares to the universal practice. That is, the clown is mediator. He is an instrument limited only by the flaws and foibles of humanity. He is the "scapegoat" who takes the risks and who faces the punishment, suffers the humiliations and for the humiliated. The clown does the same things for Hopi audiences and, by extension, for all humanity because it does seem to be a common assumption within diverse cultures that society needs scapegoats, because we are, after all, only human, and we are flawed. We also cannot look at ourselves and admit our flaws. Since we cannot face ourselves on our own, we often look for someone else to go through this painful journey for us.

The relationship that the authors would like to make between this conventional figure and what we seek to accomplish with this training guide is, simply, that the responsibility of serving people deals precisely with the ultimate reconciliation of humanity to itself. Social workers, or for that matter any others who commit themselves to work in the helping professions, are required by their standards of performance to enable those people who have become disabled, whether in body or spirit. The responsibility which comes with this commitment demands all the knowledge, skills, sensibilities and sensitivities that they bring to bear on their work, just as surely as the Hopi clowning function demands that the clown bring the same qualities to bear on his craft.

Hopi elders who know and practice clowning believe that all of us are clowns, which is another way of reminding us of our earthly limitations. This is the truth which underlies all the knowledge and skills with which human welfare is concerned.

For the Hopi clown, success is measured by the effect he will have on his audience. His aim must be true. His attitude must be guided by his mission. He must submit himself to the authority which calls him to his task. Is this not apt, also, for the human service professional?

Acknowledgements

This volume, a companion to the earlier model, *Collaboration: The Key*, enjoys no less a distinguished camaraderie of benefactors. In its conception and development the staff has relied heavily on generous gifts of time and practiced judgment from familiar supporters.

We thank the writers, all of them among the busiest and most dedicated servants, especially because the demand was on their most precious commodity, time. Each has produced an offering which amply fulfils the hope expressed by one "that supervisors of Indian child welfare workers will be able to use this...as a practical reference manual for working with tribal governments and Indian communities in planning and managing child welfare programs and supervising caseworkers." They are:

Michael Hughes, Consultant on Indian Policy Issues

Michael Hughes is a member of the Hopi Tribe. We are indebted extensively to Mr. Hughes for his informative, comprehensive and illuminating historical perspective on Indian child welfare. He has 17 years of experience in working with tribes on social welfare issues, most recently as Special Assistant to the Assistant Secretary of Indian Affairs, formerly, as an Assistant Director for Intergovernmental Operations for the state Department of Economic Security (Arizona) and as a Tribal Planner. Additionally, his work with the Southwest Indian Development firm enabled him to understand the need for community organization as a central theme in the profession of social services.

Anne Szulgit, MSW, Director of Youth Services, Salt River Pima-Maricopa Indian Community.

Ms. Szulgit's section is grounded upon eight years of family practice in the Salt River Pima-Maricopa Indian Community and, before that, as a private practitioner. Her knowledge of families in crisis gives her the unique ability to understand the dynamics inherent to working with such families. This knowledge is combined with cross cultural skills that were honed during her tenure as the Director of Salt River Indian Community Youth Home and later as the Director of Youth Services for the tribe. Her experience in community development gives her an integrated perspective in meeting the needs of Indian families.

Lorena Naseyowma, MSW, Supervisory Social Worker, Hopi Guidance Center

Ms. Naseyowma's contribution to this publication was crucial because case management is the modality which is used extensively by the Bureau of Indian Affairs, state agencies, and tribal governments. As a Hopi practitioner she is well aware of the need to work within the cultural context of her community. Her description of case management is salient and easily

understood. Ms. Naseyowma has experience as a direct practice social worker, and, until recently, as a supervisory social worker with the Hopi Tribal Social Services Program. Additionally, her experience as a consultant to the Hopi Tribe's Division of Behavioral Health Manpower Program coupled with experience gained as a former Director of the Hopi Talent Search has enabled Ms. Naseyowma to understand the very important issues that surround the provision of social services.

Maggie Allen, M.S. Ed., Director of Program Services, Gila County Superior Court, State of Arizona

Grants and contracts are often perceived as a drudgery, yet Ms. Allen's experience as a child welfare supervisor at Gila River Indian Community, as a Family Enrichment Coordinator in a rural community, Director of Probation Program Services, has alleviated some of the drudgery. Additionally, her administrative experience as Director of Women's Services for the YMCA, has provided her with a breadth of planning skills through federal, state, tribal, county and city experiences in management and contracts which sets the foundation for this piece.

Robert Lewis, MSW, Director of Health and Human Services, Salt River Pima-Maricopa Indian Community

Mr. Robert Lewis is the dean of Indian tribal social work programs. He developed the first contracted program with the federal government which has served as a model for various tribes across the nation. He has 22 years of experience as a manager of human services; his work has been sought after by the Bureau of Indian Affairs, Indian Court Judge's Association and other organizations working with Indian social welfare. Mr. Lewis has acted as a field instructor for administrative graduate students both for ASU and other universities. His experience as an educator and administrator stood him in very good stead in the development of this very crucial piece of the curriculum. He is often asked to present his ideas at local, regional, and national workshops.

Timothy Perry, MSW, Director of Social Services, Salt River Pima-Maricopa Indian Community

Mr. Perry's 10 years of administrative experience in an alcohol and substance abuse program, family and children's services for an urban Indian Center, as a program planner with the Inter Tribal Council of Arizona and currently as Director of Salt River Indian Community Social Services, are a reflection of the respect he enjoys in the Indian community for his insights, skills and knowledge as manager. His experience is coupled with the skills of an educator which adds to the clarity and quality of this section. He provides knowledge in an area in which social work education often is deficient.

Donald F. Fausel,DSW, Associate Professor, School of Social Work, Arizona State University.

Dr. Fausel has been a member of the faculty at Arizona State University since 1969, and offers to this manual the academic experience reflected, additional to teaching, in roles extending from authorship of several books, training manuals, professional papers and articles on administration as Director of the Graduate Program, Assistant Dean of the School, Director of the Undergraduate Social Work Program, among others. His practice background includes experience in adoptions, foster care, marriage and family counseling and administration. His present practice and research focuses on helping professionals who are impaired by alcohol or drug abuse. An associate of Community Resources Associates' Counseling Connection, he counsels with single and remarried families, with a special interest in chemically dependent families and custody/visitation issues of children of divorce or separation. Dr. Fausel's contribution to this manual provides the academic knowledge and foundation which is essential to the integrity of such a resource as this training manual. Beyond this essence, he is the reflection of academic, professional and civic dedication.

Linda Tiller, ACSW, MSW, Program Manager, Arizona Department of Economic Security

Ms. Tiller comes from a history of rich experience in direct practice, including child protective service, as well as formal training at Ohio State University. Her experience covers direction, program operation and administration. Currently, she holds the position of District Program Manager for Western Arizona, Arizona Department of Economic Security, overseeing between 80 to 100 staff personnel and a budget of over two million dollars. She brings to her section a background in extensive interrelationships with the Court, Foster Care Review Board, community and contract providers. She has established a record of success in child protective services through her skill in reaching those in crisis. She has had extensive experience working with various cultural, social and ethnic groups. Other attributes she brings are her resourceful management under time and budget limitations, her teaching and communications skills and strong personal commitment. She is a professional. Her experience within the State helping system provides an essential dimension which contributes to the collaborative whole which this manual seeks.

In addition, among those who have obliged the staff with gracious gifts of time and expertise is Ms. Ruth Houghton, whose knowledge and experience, specific to Native Americans, in direct practice, development of programs, policy and administration cover every tribal group in Arizona and is unmatched. All project coordinators should be so richly blessed.

Others willing to provide reading time, consultation, thoughtful and/or provocative ideas as well as technical and academic help include, in addition to committee and panel members

listed, MSW students Darlene Johnson, Lucinda Waseta, and Marie Jim; faculty members Steven Applewhite and Dean Hepworth; tribal leader, Vernon Masayesva whose thoughts inspire a vision of the future and are reflected in thoughful and sensitive articulation; and front office staff, Betty Wood and Kimberly Vega.

Dr. Ann MacEachron answered the call to be principal investigator during the temporary absence of the staff director, Edwin Gonzalez-Santin, to teach at Humboldt State University in California. Dr. MacEachron from the beginning was a "natural" on the team, bringing to the project superior competence in academic research and knowledge as well as practiced experience. Finally, the staff recognizes, acknowledges and offers the deepest appreciation for the unconditional support of the Dean's office in the School of Social Work. With the departure to another assignment of Dean Jesse McClure, in August, the office in the person of Interim Dean, Peter Kettner, gave the Project uninterrupted support and welcome sensitivity during a stressful transition in the life of our project.

Edwin Gonzalez-Santin, Project Director
Allison Lewis, Project Coordinator

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In 1744, Maryland and Virginia commissioners negotiated a treaty with the Indians of the Six Nations that invited Indians to send boys to William and Mary College. The Indians declined the offer the following day:

> "We know that you highly esteem the kind of learning taught in those Colleges, and the Maintenance of our young Men, while with you, would be very expensive to you. We are convinced, that you mean to do us Good by your Proposal; and we thank you heartily. But you, who are wise must know that different Nations have different Conceptions of things and you will therefore not take it amiss, if our Ideas of this kind of Education happen not to be the same as yours. We have had some Experience of it. Several of our Young People were formerly brought up at the Colleges of the Northern Provinces; they were instructed in all your Sciences; but, when they came back to us, they were bad Runners, ignorant of every means of living in the woods...neither fit for Hunters, Warriors, nor Counsellors, they were totally good for nothing. We are, however, not the less oblig'd by your kind offer, tho' we decline accepting it; and, to show our grateful Sense of it, if the Gentlemen of Virginia will send us a Dozen of their sons, we will take Care of their Education, instruct them in all we know, and make Men of them." (Drake, Biography and history of the Indians of North America, 1834, as reported by Guerrero, 1979, 51).

Preface

This curriculum guide resulted from the collaboration of the following organizations:

The Inter Tribal Council of Arizona, Inc.
The Arizona Department of Economic Security, Administration for Children, Youth and Families
The School of Social Work, Arizona State University
The Navajo Nation Division of Social Services

This introduction provides a brief historical context to the Indian Child Welfare Act and analyses of two research activities conducted by the collaborating partners. These analyses provide the basis for the definition of the curriculum.

I. Historical Perspective Of The Indian Child Welfare Act.

The colonization of America by England, France, and Spain began the inexorable conquest, decimation and assimilation of Native American land and peoples (Kunesh-Hartman, 1989). Federal policies over the last two centuries have led not only to the disappearance of entire tribes, but also to the decimation of the Indian population from an estimated ten million during the early colonization period to about one million in 1980 (Carpenter, 1980, 456).

Indian extermination followed by extreme policy cycles of assimilation and termination, as well as policies of tribal sovereignty and tribal self-determination, provide the historical context of "extremes" underlying the Indian Child Welfare Act of 1978. As Brophy & Aberle highlight, many extreme shifts of policy have occurred even within the last century:

> "Over the last century, government policy has more than once swung with disconcerting swiftness from one extreme to the other - from recognizing tribes as independent nations to dealing with the members as virtual prisoners; from ignoring or suppressing Indian culture to extolling it; from requiring that all decisions, even the most trivial, originate in Washington, to permitting a high degree of self-rule" (Brophy & Aberle, 1966, 7).

Prior to 1871, the conquest of Indian land was accomplished primarily by force of arms in the "Indian Wars," in effect, "extermination" of Indian peoples, and by the "removal" of Indian peoples, some from their native land to distant reservations. The removals were results of arbitrary, even capricious, betrayals of trust relationships and broken treaties. A concurrent theme, arising through "humanitarian" and "Christian" beliefs, was assimilation of Indians into White culture through education, conversion to Christianity, and agricultural-industrial work. President Jackson summarized this policy perspective as follows:

"Professing a desire to civilize and settle them, we have at the same time lost no opportunity to purchase their lands and thrust them further into the wilderness" (President Jackson's 1829 Message to Congress cited from Prucha, 1990, 47).

But it was not until after 1871, when most Indian land had been conquered, that assimilation became federal policy.

Assimilation and the Indian Child Welfare Act. Given 400 years of forced assimilation, it is not surprising that the intent of the Indian Child Welfare Act was "to protect the best interests of Indian children and to promote the stability and security of Indian families." But why did this occur in 1978?

Why in 1978?

The federal government had, until then, followed an assimilation policy by removing Indian children and raising them in non-Indian culture. This practice "was complementary to this national policy of destroying tribalism" (Trentadue & DeMontigny, 1986, 495). From the late 1960's federal policy began to shift to an emphasis on self-determination in tribal government, education, religious freedom, and lastly child welfare. (Table 1, at the end of this section, summarizes federal policies since 1871).

Moreover, hearings conducted in 1974 before the Senate Committee on Interior and Insular Affairs and in 1977 before the Senate Subcommittee on Indian Affairs began to reveal the destructive effects of assimilation. The hearings of 1974 heightened sensitivity to cultural preservation (MacCartney, 1975). The 1977 testimony (reprinted in Unger, 1977) of William Byler, Executive Director of the Association on American Indian Affairs (a national organization to assist Native Americans to achieve economic and social equality), and conclusions of James Abourezk, Senator from South Dakota and Chair of the Senate Subcommittee, are highlighted, in part:

- "Surveys of states with large Indian populations conducted by the Association on American Indian Affairs (AAIA) in 1969 and again in 1974 indicate that approximately 20-25 per cent of all Indian children are separated from their families and placed in foster homes, adoptive homes, or institutions....in 1972, nearly one in every four Indian children under one year of age was adopted" (Byler, 1977, 1).

- "The disparity in placement rates for Indian and non-Indians is shocking. In Minnesota, Indian children are placed in foster care or in adoptive homes at a per capita rate five times greater than non-Indian children. In Montana, the ratio of Indian foster-care placement is at least 13 times greater. In South Dakota, 40 percent of all adoptions made by the State's Department of Public Welfare since 1967-68 are

of Indian children, yet Indians make up only 7 percent of the juvenile population. The number of South Dakota Indian children living in foster homes is, per capita, nearly 16 times greater than the non-Indian rate. In the state of Washington, the Indian adoption rate is 19 times greater and the foster-care rate ten times greater. In Wisconsin, the risk run by Indian children of being separated from their parents is nearly 1600 percent greater than it is for non-Indian children" (Byler, 1977, 1).

- "In 16 states surveyed in 1969, approximately 85 percent of all Indian children in foster care were living in non-Indian homes" (Byler, 1977, 2).

- "The federal boarding-school and dormitory programs also contribute to the destruction of Indian family and community life. The Bureau of Indian Affairs (BIA), in its school census for 1971, indicates that 34,538 children live in its institutional facilities rather than at home" (Byler, 1977, 1-2).

- "Very few Indian children are removed from their families on the grounds of physical abuse...99 percent of the cases were argued on such vague grounds as 'neglect' or 'social deprivation' and on allegation of the emotional damage the children were subject to by living with their parents" (Byler, 1977, 2).

- "The wholesale separation of Indian children from their families is perhaps the most tragic and destructive aspect of American Indian life today... It is clear then that the Indian child-welfare crisis is of massive proportions and that Indian families face vastly greater risks of involuntary separation than are typical of our society as a whole" (Byler, 1977, 1-2).

- "Because the family is the most fundamental economic, educational, and health-care unit in society and the center of an individual's emotional life, assaults on Indian families help cause the conditions that characterize those cultures of poverty where large numbers of people feel hopeless, powerless, and unworthy...Children separated from their parents may suffer such severe distress that it interferes with their physical, mental, and social growth and development...In our efforts to make Indian children 'White' we can destroy them" (Byler, 1977, 8-9).

There were other than state foster care and adoptive placements occurring as well. The BIA in concert with the Child Welfare League of America placed about 400 Indian children with non-Indian families between 1958 and 1967 (Davies, 1982, 181), and the Latter Day Saints Placement Program "removed as many as 2000 Hopi and Navajo children every year from their reservations, placing them in Mormon homes throughout the country" (Weyler, 1982, 149, as reported by Kunesh-Hartman, 1989).

In sum, the "why" question may be answered in two ways. On one hand, all federal policies regarding Indian affairs were under congressional review with the intention of recommending new legislation which would be more consistent with the umbrella policy of self-determination (see Establishment of the American Indian Policy Review Commission, January 2, 1975, in Prucha, 1990, 272-3). On the other hand, the AAIA survey information (Byler, 1977) as well as the testimony from other tribal and Indian organizations, states and private agencies in 1974 and 1977 all supported the "shocking" and devastating effects of current child welfare policy on Indian children and families.

Policy implications for Indian Child Welfare. The long-term policy context of assimilation versus self-determination suggests that current policies may change rapidly. Within this century alone, two federal legislative agenda have emphasized self-determination policy: the Wheeler-Howard Indian Reorganization Act of 1934 and the Indian Self-Determination and Education Act of 1975. Within this century, the first attempt was overturned within twenty years by the termination policies of the House Concurrent Resolution 108 and Public Law 83-280.

While current self-determination legislation provides mechanisms for tribes to reassert tribal self-government, the question must always remain "for how long?" In 1988, for example, several non-Indian organizations began a national media campaign to lift restrictions on the placement of Indian children in non-Indian homes. The Secretary of the Interior, Donald Hodel, also objected to clarifying and broadening amendments to the Act on the basis of "pure racism." Given this politically combative context, child welfare workers serving in tribal social service systems no doubt ask "for how long?" as well. Uncertainty of survival, both of one's tribe and of one's tribal child welfare system, is unique to Indian child welfare.

The lack of entitlement funds adds heavily to the policy context of uncertainty, as does the lack of federal responsibility for ensuring minimum funding for the purpose of Indian child welfare. Moreover, under the same rubric of self-determination, Presidents Johnson and Nixon encouraged tribal governments to apply directly for federal funding but President Reagan later called upon the tribes to take greater fiscal responsibility for their own self-governments.

These Presidents and Congress recognized that Indian tribes remain one of the poorest and most disadvantaged groups in the United States, yet the Indian Child Welfare Act provided no clear or reasonable mechanisms to achieve stable funding levels to establish and operate tribal social service and court systems. In addition, as the tribal case load has increased since 1978, funding of tribal services has decreased. Without funding there can be few Indian facilities and services so, paradoxically, Indian children potentially could continue to be placed in non-Indian environments (Howard, 1984, 526; Beane, 1989).

A critical issue, therefore, is how to develop and administer effective tribal social service systems handicapped with no access to predictable and stable levels of funding.

Since the Indian Child Welfare Act defines minimal federal involvement, the implication is that state and tribal courts as well as state and tribal child welfare systems must either come to negotiated agreements or engage in extensive legal battles over child custody decisions and funding. The comparative lack of resources and professional staff in Indian child welfare versus state child welfare systems puts tribes at a substantial disadvantage when they must engage in negotiations and court litigation.

In sum, uncertainty of survival, unpredictable federal and state funding for tribal services, and zero-sum consequences for failure all define a unique and challenging policy context for all people and tribes who engage in Indian child welfare systems.

Table 1: History of federal policies involving assimilation and self determination [1]

Date	Federal Policy
EARLY RESERVATION POLICY: 1871-1928	
1871	No more treaties to be made with American Indian tribes. Indian tribes no longer recognized as independent nations with treaty-making powers. All future contracts to require approval by the Commissioner of Indian Affairs and the Secretary of the Interior.
1876	States are forbidden to tax American Indians on the reservation.
1883	Secretary of the Interior to establish Indian or tribal courts to deal with minor offenses on reservations.
1885	Major Crimes Act. Federal government assumes jurisdiction over major crimes committed by American Indians on reservations. This Act substantially undercut traditional tribal autonomy.
1887	Dawes General Allotment Act. Divided tribal land into individual allotments; individual tribal members were allowed to sell their allotted land. The federal government bought the surplus. Over 90 million acres or 95% of Indian land pass out of tribal control. Commissioner of Indian Affairs argues for the exclusive use of English at all Indian schools for "educating and citizenizing the Indians."
1889	Commissioner of Indian Affairs argues for the "inculcation of patriotism in Indian Schools" to train Indian children as American citizens. Commissioner of Indian Affairs presents a plan for a national system of Indian schools, the number of Indian children to be educated not to exceed 36,000 of whom 15,000 were already enrolled in schools.
1892	Rules for Indian Courts modified by the Commissioner of Indian Affairs.

continued next page

[1]Adapted from Beane (1989), Fischler (1980) and Prucha (1990). Fischler adapted this table from the Center for Social Research and Development, Indian Child Welfare: A State of the Field Study (Denver, Co.: University of Denver, 1976). Quotation and documents of each law are in Prucha unless otherwise referenced.

Table 1 continued: History of federal policies involving assimilation and self-determination

Date	Federal Policy

1893 School attendance made mandatory for American Indian children. (Food rations were withheld for poor compliance; farming, home implements offered as incentives for cooperation).

1921 Snyder Act. While providing no funds, the law authorizes federal appropriations and expenditures for the benefit of Indians. The Bureau of Indian Affairs and the Indian Health Service receive permanent financial authorization which only requires annual appropriations.

1924 Indian Citizenship Act. American Indians declared citizens of the United States.

INDIAN REORGANIZATION POLICY: 1928-1953

1928 The Meriam Report, done by Lewis Meriam at the Brookings Institution, set forth the devastating economic and social conditions of Indians and made recommendations for government action. The reasons for Indian social and economic problems included the Dawes General Allotment Act and removal of Indian children from the reservation to boarding schools and placement with White families. Recommends individual Indian choice to either assimilate or to "remain Indians." Both choices were to require federal or state support. Education is to be the primary purpose of the Indian Service.

1934 Johnson-O'Malley Act. Authorized the Secretary of the Interior to contract with states to pay for the "education, medical attention, relief of distress, and social welfare of Indians."

Wheeler-Howard Indian Reorganization Act. Land allotments end. Reaffirms federal trusteeship of Indian people and land. Establishes reservations for tribes without land. Tribal self-government is established with assistance from the Bureau of Indian Affairs. Encourages adoption of tribal constitutions based on the U.S. Constitution rather than tribal forms of governance. Establishes preference for hiring Indians in the Indian Office.

1948 Hoover Commission recommended state responsibility for Indians. Forerunner of termination policy (Beane, 1989).

continued on next page

Table 1 continued: History of federal policies involving assimilation and self-determination

Date	Federal Policy

TERMINATION ERA: 1953 - 1968

1953 House Concurrent Resolution 108. The House began the "process of termination" by making it federal policy "to abolish federal supervision over the tribes as soon as possible and to subject the Indians to the same laws, privileges, and responsibilities as other citizens of the United States." More than 100 tribes were terminated (Beane, 1989).

1953 Public Law 83-280. Implements Resolution 108. Congress allowed states to assert state jurisdiction over criminal and civil offenses on Indian reservations without tribal approval - in 1968, this law was amended to require tribal approval and for the federal government to accept retrocession. Alaska, California, Minnesota (except Red Lake), Oregon, Wisconsin, Florida, Idaho, Nevada, Washington, and Montana (Flathead Reservation only) petitioned for jurisdiction. Several tribes were paid off in exchange for release from all benefits. Indian children requiring care were provided few choices of substitute care.

1955 Establishment of the Indian Health Service under the U.S. Public Health Service rather than the Bureau of Indian Affairs.

1956 Vocational Training Act. Provided vocational training to Indians relocating to urban areas. This "relocation" policy was to assist the assimilation of Indians into the urban mainstream (Beane, 1989).

SELF-DETERMINATION ERA: 1968 - 1980

1968 President Johnson, in a special message to Congress, states that, "I propose a new goal for our Indian programs: A goal that ends the old debate about 'termination' of Indian programs and stresses self-determination; a goal that erases old attitudes of paternalism and promotes....self-help, self-development, self-determination."

1968 Indian Civil Rights Act. Public Law 83-280 is modified by requiring tribal permission before states can assert jurisdiction over Indian reservations. Applied the Bill of Rights, including due process, to Indians in their relations with the tribal governments. Authorized a model code for tribal courts of Indian appropriations were authorized for services. continued on next page

Table 1 continued: History of federal policies involving assimilation and self-determination

Date	Federal Policy
1970	President Nixon, in a special message on Indian Affairs, mandates Congress to carry out his policy of self-determination without termination: "...to strengthen the Indian's sense of autonomy without threatening his sense of community." (Note: The Johnson and Nixon commitment of self-determination was reflected in later P.L. 93-638.)
1972	Indian Education Act. Provides for financial, legislative, and administrative support (within the Department of Health, Education and Welfare) for Indians. Provides federal funds to schools with large Indian populations for remedial reading, writing, and math. This Act responded to the severe criticism of Indian education given in 1969 Senate Hearings on Indian education.
1974	Indian Financing Act. Provides federal financing for Indian economic development and self-sufficiency.
1975	Indian Self-Determination and Education Act, Public Law 93-638. Provides for "maximum Indian participation in the government and education of Indian people." Tribes are permitted to contract with the Bureau of Indian Affairs and the Indian Health Service to provide tribal services. Provides funding to upgrade Indian education and to strengthen tribal government. However, the laws concerning the termination policy were not repealed (House Concurrent Resolution 108 and P.L. 83-280).
1976	Indian Health Care Improvement Act, Public Law 94-437. Congress authorizes funds to lessen the gap between Indian health conditions and the total population and to encourage maximum participation of Indians in these programs and services.
1978	American Indian Religious Freedom. Congress supports Indian cultural autonomy in this policy statement about Indian religious freedom. The Bureau of Indian Affairs, in response to the Indian movement for self-determination, issued "procedures for establishing that an American Indian group exists as an Indian tribe."

continued on next page

Table 1 continued: History of federal policies involving assimilation and self-determination

Date	Federal Policy
1978	Education Amendments Act of 1978, Public Law 95-561. Purpose is to define standards for Indian schools, dormitories, school facilities, and rules to ensure the constitutional and civil rights of Indian students. This Act supported the implementation of the Bureau of Indian Affairs regulations concerning student rights and due process procedures in 1974. Indian Child Welfare Act, Public Law 95-608. Minimum standards set for state custody proceedings affecting American Indian children. Jurisdiction over child welfare matters returned to tribes. Funds appropriated for services to strengthen families and serve children.
RETRENCHMENT ERA: 1980 -	
1983	President Reagan gives his administration's Indian Policy statement. Reagan reaffirms self-determination policy and recognizes that since 1975, "there has been more rhetoric than action." Reagan calls for the federal government "to move away from this surrogate role which undermines the concept of self-government: and for increased tribal responsibility of the costs of self-government. As Prucha (1990, 301) points out, "cuts in federal aid during his administration...severely affected Indian communities."

II. Brainstorming Curriculum Ideas

In developing training materials for human services workers in Indian communities, the collaborating partners have followed a deliberate and determined policy, that of relying on the guidance and direction of experienced practitioners in the field. It is the practiced judgment of such a policy and planning group which mobilized the brainstorming that produced the assessments used for identification of competencies and determination of needs as expressed by those who are faced daily with the problem solving tasks in the community.

In study 1, one group of Arizona State DES supervisors and two groups of Indian community agency supervisors brainstormed around three questions posed for "defining competencies for supervisors in public child welfare serving Indian communities. Below are listed the questions and rated answers from each group; these provided guidance in developing the curriculum and the survey instrument for the second study. Order of priority: 1=highest.

TABLE 2:
SUMMARY OF NOMINAL GROUP IDENTIFICATION OF COMPETENCIES FOR INDIAN CHILD WELFARE SERVICE

Question 1: What are the SKILLS needed for child welfare supervisors serving Indian communities?

	6/30/89 Group I	9/20/89 Group II	9/6/89 Group III
1.	Basic management	Communication	Effective teacher
2.	Communication	Effective listening	Prioritize activities
3.	Problem solving	Leadership	Delegation
4.	Decision making	Writing skills	Ability to adjust to change
5.	Effective writing	Motivating others	Listening skills
6.	Leadership	Decision making	Evaluation and Assessment
7.	Administrative	Confidentiality	
8.	Time management	Understanding extended family dynamics	
9.	Case planning		
10.	Child welfare work skills		
11.	Setting goals/objectives		
12.	Listening		
13.	Complaining constructively		
14.	Disciplining		

Total number of listed SKILLS subjected to prioritization:

Group	I:	60
Group	II:	43
Group	III:	48

TABLE 2 (cont'd)

Question 2 What are the VALUES needed for child welfare supervisors serving Indian communities?

	6/30/89 Group I	9/29/89 Group II	9/6/89 Group III
1.	Respect of Children/ Families	Sensitive to needs of children	Safe environment for children
2.	Non-judgmental	Trustworthy	Value of life
3.	Life	Honesty	Code of ethics
4.	Sensitivity	Competence	Honesty
5.	Humanity	Christianity	The family
6.	Nuclear/extended family	Child's welfare is priority	The right of people to make choices
7.	Empathy	Objective assessment	
8.	Open-mindedness	Job competence	
9.	Faith		

Total number listed **values** subjected to prioritization:

Group I: 21
Group II: 30
Group III: 26

Question 3: What are the KNOWLEDGE AREAS needed for child welfare supervisors serving Indian communities?

	6/30/89 Group I	9/29/89 Group II	9/6/89 Group III
1.	Policies, procedures (child welfare)	Regulations, codes, laws	Supervisory role
2.	Social work principles, ethics, practice	Social work	Child abuse and neglect
3.	Program goals and objectives	Family structure	Legal process
4.	Regulations (congressional amend-ments)	Drug/alcohol abuse	Agency program policy
5.	Indian culture, values, customs	Program budgeting	Rules, regulations
6.	Policy, procedure development	Needs of clients and workers	Child welfare law

TABLE 2 (cont'd)

Question 3 (cont'd)

	6/30/89 Group I	9/29/89 Group II	9/6/89 Group III
7.	Contract compliance regulations	Procedures of other agencies	
8.	Basic family counseling techniques		
9.	Community resources		
10.	Family court procedures		

A COMPARATIVE STUDY OF TRIBAL AND STATE CHILD WELFARE SUPERVISORS

To improve our knowledge base, in study 2, we undertook an empirical survey of supervisors in Indian child welfare to examine:

- the job responsibilities and tasks of tribal social work supervisors with responsibility for Indian child welfare,
- the educational and experience background of supervisors,
- the performance evaluation of supervisors and their workers,
- the job training received and desired by supervisors, and
- an comparative analysis of tribal and state supervisors in child welfare.

The survey questionnaire was sent to 100 state and tribal child welfare supervisors of which 49 state and 36 tribal surveys were returned. This empirical data suggested priorities for supervisory training needs which are discussed in-depth in the following chapters of this curriculum guide. Statistical tables from which the following observations are summarized are displayed in the Appendices attached to the training manual at the end of this section.

A profile of characteristics of tribal and state supervisors (Table 3) is as follows: female, over the age of 30, married with children, spent 3 years in her current supervisory position, spent 4 years in supervisory positions, has a bachelor's degree and previous job related experience, has a social work degree, and believed she was prepared to supervise child welfare caseworkers. Tribal supervisors were Indian, with a bachelor's degree or high school diploma, spent 6 years in the child welfare field, and had a salary of $23,000. State supervisors were non-Indian, with a BSW degree, spent 9 years in the child welfare field, and had a salary of $31,000. Job requirements were similar for tribal and state supervisors.

Tribal and state supervisees, on average, had similar job requirements for education and previous job-related experience (Table 4). Their supervisors believed that there was inadequate agency training to meet needs of the supervisees. Nonetheless, tribal and state supervisors believed that the majority of their supervisees were sufficiently prepared to do child welfare casework (Table 5). Tribal supervisees had a larger caseload (34 cases) than did state supervisees (20 cases) as shown in Table 6. Tribal supervisees desired ideal caseloads of 21, and state supervisees, 16.

Tribal and state supervisors have about the same number of caseworkers (12 and 9 respectively), although tribal supervisors tend to have more social service workers (Table 7).

Tribal supervisors tend to define cases as individual children or persons, whereas state supervisors tend to define them as families (Table 6). Both agreed, however, that "active cases" require court involvement or on-going contact. Tribal supervisors reported having an average caseload of 19 people in contrast to 4 for state supervisors. Tribal supervisors, unlike state supervisors, prefer having a caseload.

Both tribal and state agencies were equally likely to provide an array of child welfare services (Table 8). Tribal agencies, however, were much more likely to provide a range of general social services as well.

The job responsibilities and primary functions of tribal and state supervisors were substantially different (Table 9). Overall, tribal supervisors participated in more tasks than did state supervisors (14 and 10 tasks, respectively) and had more primary job responsibilities (9 and 5, respectively). Tribal supervisors were much less likely to participate in or have primary job functions for areas of traditional supervisory tasks than were state supervisors. However, tribal supervisors were much more likely to participate in and have primary job functions for areas of community involvement, agency planning and policy, and agency budgeting processes than were state supervisors.

Tribal supervisors tended to have less supervisory authority over supervisees than did state supervisors (Table 10). Both had final authority in setting worker timelines and both made recommendations concerning work dismissal, worker transfer to their unit, and promotion/demotion of workers. Tribal supervisors were less likely to recommend hiring/selecting of workers for their unit, give verbal or written evaluation of job performance, settle disputes between workers, change worker tasks, and assign tasks to workers. Tribal supervisors were more likely to recommend training programs for workers. Neither tribal nor state supervisors were much involved in changing pay scales or transferring workers.

Performance evaluation criteria apeared to be quite similar for tribal and state supervisors (Table 11). Performance evaluation of tribal and state supervisees also appeared to be quite similar (Table 12).

Most tribal and state supervisors were satisfied with the intrinsic factors of their jobs (e.g., supervisory authority and responsibilities) (Table 13). Despite the fact that they earned substantially less, more tribal supervisors were satisfied with the extrinsic factors of their jobs (e.g., pay) than were state supervisors.

Given 28 training areas, tribal and state supervisors had been involved in 11 of these areas on average, even though tribal supervisors had to go outside the agency for training (Table 14). Tribal supervisors desired more training in 20 job-related areas whereas state supervisors desired more training only in 11 job-related areas.

The 28 training areas were categorized into four content areas: traditional supervision, traditional services, non-Indian and Indian child welfare, and agency management. Tribal and state supervisors were equally likely to receive training in six of ten traditional supervision areas, in seven of the nine service areas, in three of the five areas of child welfare (child welfare courts, tribal governance, and the Inter-State Compact Act), and in two of four areas of agency management.

Tribal supervisors were less likely than were state supervisors to receive training in three areas of supervision and in one area of child welfare (state governance).

Tribal supervisors were more likely than were state supervisors to receive training in one of the ten areas of supervision, in two of the nine service areas, in one of five areas of child welfare (the Indian Child Welfare Act), and in two of four areas of agency management. Such findings contradict the feelings of child welfare workers who, as reported by Kessel & Robbins (1984, 229), resented the "lack of child welfare training among tribal personnel."

A large majority of tribal supervisors wanted more training in all areas of supervision, services, non-Indian and Indian child welfare, and agency management.

A majority of state supervisors wanted more training in all ten areas of supervision, in two of the nine areas of traditional services, and in one area of child welfare (child welfare courts). It is worth noting that about a fifth or less of state supervisors desired more training in the three areas most relevant to Indian child welfare: the Indian Child Welfare Act, tribal governance, and the Inter-State Compact Act.

Discussion and summary. Few could have summoned much hope of success for Indian self-determination in any area including that of child welfare given the long and tragic his-

tory behind the Self-Determination Act and Indian Child Welfare Act, given the continuing scarcity of funding and resources, given the reluctance of the Bureau of Indian Affairs and other federal and state agencies, as well as courts, to provide support for Indian self-determination, and given the relative extent of poverty and problems found on reservations. But those few who hoped were right.

Earlier, this report demonstrated the positive and substantial impact of the Indian Child Welfare Act on foster home and adoptive placements of Indian children. These placements, only a decade previously and across the national landscape, had reached such extremes as to imperil Indian family, clan and tribal survival. In this state since passage of the ICWA, the foster home placement of Indian children dropped 42 percent and adoptive placements by state agencies dropped 100 percent.

In sum, first and foremost, Indians are in control of Indian child welfare services. Over three-quarters of the tribal participants in this study were Indians, fulfilling the ICWA mandate and definition of expertise in this area. In addition, the educational and professional levels of tribal supervisors were equivalent to levels reported nationally for child welfare supervisors.

Second, the development of Indian child welfare services by Indians has provided the opportunity for Indian culture rather than non-Indian culture to permeate the bones of bureaucracy. The roles of tribal and state supervisors differed substantially. While the state supervisors appeared to conform to roles prescribed by traditional supervisory functions and responsibilities, tribal supervisors worked within a much broader and holistic supervisory context. Tribal supervisors not only performed traditional supervisory functions, they also carried caseloads as direct service providers and they carried management responsibilities within agency and community. Despite doing so much more and being paid so much less than traditional state supervisors, tribal supervisors reported similarly high or higher levels of job satisfaction than did state supervisors.

The results regarding training and training needs reflected the different roles of tribal and state social workers. State supervisors, for example, were most likely to want more training in traditional supervisory areas whereas tribal supervisors wanted training in areas of supervision, services, non-Indian and Indian child welfare, and agency management. It is worth noting as well that state supervisors placed a low priority on training areas directly relevant to Indian child welfare.

Conclusion. In sum, it is remarkable that, in less than a decade after its passage, the effectiveness of the Indian Child Welfare Act of 1978 is so evident. Yet another benchmark of self-determination policy has been accomplished, despite omnipresent themes of uncertainty of survival, unpredictable and diminishing funding, and zero-sum consequences hinged to failure.

The sustained creative power of Native American tribes and peoples energizes those who, with few resources and against great odds, continue to achieve the goals of the Indian Child Welfare Act. It is this resourcefulness that provides the context for child welfare workers and supervisors who daily recreate "the Act" for Indian children, their families, and their tribes.

Lastly, the image that emerges from the totality of findings is that of newly formed patterns of organizational structure and content protecting and supporting Indian families and children. As tribal governments define and elaborate Indian organizations, some may say that:

> '...administrative management is the key to successful implementation of the self-determination policy,' Robert Lafollette Bennett, Oneida, former commissioner of Indian affairs." (Old Person, et. al., 1986, 252).

Others may say that Indian culture itself is the key to survival.

Table 3: Percentage distributions, Student t-tests of mean differences and significant[a] Pearson correlations between tribal/state auspice and supervisor characteristics

Supervisor characteristics	Percentages Tribal	Percentages State	Means[b] Tribal	Means[b] State	Pearson r
Gender			48%	58%	
0. Male	52%	42%			
1. Female	48%	58%			
Age			89%	100%	
0. Below 30 years of age	11%	0%			
1. 30 years of age or over	89%	100%			
Married			65%	56%	
0. No	35%	44%			
1. Yes	65%	56%			
Have Children			86%	65%	
0. No	14%	35%			
1. Yes	86%	65%			
Ethnicity				**	.45 **
1. American Indian	72%	2%			
2. Hispanic	6%	19%			
3. Asian	0%	6%			
4. Caucasion	17%	71%			
5. Black	3%	2%			
6. Other	2%	0%			
Education level			3.8	5.0 *	.31
1. No requirements	0%	0%			
2. High school or GED	22%	4%			
3. Associate's degree	16%	2%			
4. Bachelor's degree	8%	19%			
5. Bachelor of Social Work	8%	15%			
6. Masters degree	8%	21%			
7. Masters in Social Work	28%	30%			
Numer of years in child welfare:					
- Current supervisory position			3.0	3.2	
- Supervision in career			4.1	4.5	
- Field of child welfare			6.0	9.1 *	.53
Average salary			$23,000	$31,000*	.58
Average salary of your highest paid child welfare staff			$19,800	$29,300*	.67

a. "*" indicates significant, two-tailed test ($p < .05$)
b. "**" indicates significant chi-square ($p < .05$) with asymmetric lambda

Table 4: Percentage distributions, Student t-tests of mean differences and significant[a] Pearson correlations between tribal/state auspice and supervisory job requirements

Job requirements	Percentages Tribal	Percentages State	Means Tribal	Means State	Pearson r
Current minimum education level for your supervisory position			4.0	4.2	
1. No requirements	3%	4%			
2. High school or GED	32%	9%			
3. Associate's degree	15%	0%			
4. Bachelor's degree	12%	53%			
5. Bachelor of Social Work	9%	18%			
6. Master's degree	12%	16%			
7. Master's of Social Work	18%	0%			
Ideal minimum education level for your supervisory position			5.3	5.4	
1. No requirements	0%	0%			
2. High school or GED	14%	2%			
3. Associate's degree	11%	2%			
4. Bachelor's degree	0%	15%			
5. Bachelor of Social Work	23%	30%			
6. Master's degree	11%	34%			
7. Master's of Social Work	40%	17%			
Percent who said there was previous job-related experience for their supervisory position			86%	92%	
1. No	14%	8%			
2. Yes	86%	92%			
Percent who believe there should be a requirement for previous job-related work experience for their supervisory position			100%	96%	
1. No	0%	4%			
2. Yes	100%	96%			
Do you think you are sufficiently prepared to provide supervison of child welfare caseworkers?			59%	82% *	.25
1. No	41%	18%			
2. Yes	59%	82%			

a. "*" indicates significant, two-tailed test ($p < .05$)

Table 5: Percentage distributions, Student t-tests of mean differences and significant[a] Pearson correlations between tribal/state auspice and supervisor perceptions of child welfare worker job requirements and training

Worker preparation	Percentages Tribal	State	Means Tribal	State	Pearson r
What are the educational requirements for your child welfare staff?			2.7	3.3	
1. No requirements	13%	8%			
2. High school or GED	57%	25%			
3. Associate's degree	3%	10%			
4. Bachelor's degree	3%	45%			
5. Bachelor of Social Work	20%	10%			
6. Master's degree	3%	2%			
7. Master's of Social Work	0%	0%			
Ideally:			4.4	5.0	
1. No requirements	0%	0%			
2. High school or Ged	12%	4%			
3. Associate's degree	24%	6%			
4. Bachelor's degree	9%	25%			
5. Bachelor of Social Work	33%	29%			
6. Master's degree	6%	20%			
7. Master's of Social Work	15%	16%			
Are there requirements for previous job-related experience?			84%	86%	
1. No	16%	14%			
2. Yes	84%	86%			
Ideally:			100%	94%	
1. No	0%	6%			
2. Yes	100%	94%			
Does your agency provide enough training for staff needing it?			3.2	3.1	
1. None at all	11%	0%			
2. Only for their initial introduction to the agency	3%	10%			
3. Not enough to meet the need	50%	71%			
4. Sufficient for on-going staff development	31%	18%			
5. Outstanding training	6%	0%			
Is your staff sufficiently prepared to provide direct casework in child welfare?			2.8	4.0 *	.47
1. None of my staff	26%	2%			
2. Few of my staff	19%	8%			
3. About half of my staff	19%	6%			
4. Most of my staff	23%	53%			
5. All of my staff	13%	31%			

a. "*" indicates significant, two-tailed test ($p < .05$)

Table 6: Student t-tests of mean differences, F tests of variance differences, and significant[a] Pearson correlations between tribal/state auspice, caseload definition, supervisor's client caseload and worker's caseload

	Means			Standard deviations	
Caseload definition	Tribal	State	Pearson r	Tribal	State
"Case" is a child or person (score of 0) or family (score of 1)	40%	94% *	.59	.50	.24 *
Case requires court involvement or investigation (score of 0) or other on-going contact (score of 1)	71%	67%		.46	.48
Supervisor's client caseload size					
Has a caseload:					
Currently	53%	29% *	-.25	.51	.46
Ideally	50%	10% *	-.44	.51	.31 *
Caseload size:					
Currently	19.00	3.79 *	-.47	18.95	2.36 *
Ideally	17.61	2.40 *	-.49	12.85	.89 *
Worker's client caseload size					
Currently	33.92	19.67 *	-.48	19.12	7.34 *
Ideally	21.04	15.50 *	-.33	10.59	5.38 *

a. "*" indicates significant, two-tailed test ($p < .05$)

Table 7: Student t-tests of mean differences, F tests of variance differences, and significant[a] Pearson correlations between tribal/state auspice and number of supervisees

Current number of staff supervised	Means: Tribal	Means: State		Pearson r	Standard deviations: Tribal	Standard deviations: State	
Child welfare workers	4.63	6.29			5.43	2.82	*
Social service workers	5.66	1.35	*	-.27	11.63	1.80	*
Support staff	1.46	1.45			1.33	.71	*
Total number of staff	11.94	9.08			13.69	2.63	*
Percent who supervise staff:							
Child welfare	89%	98%			.32	.14	*
Social service	83%	47%	*	-.36	.38	.50	
Support	71%	94%	*	.31	.46	.24	*
Percent of staff:							
Child welfare	44%	69%	*	.45	.29	.21	*
Social service	41%	15%	*	-.46	.29	.21	*
Support	16%	16%			.16	.07	*
Ideal number of staff supervised							
Child welfare workers	4.42	6.30			3.50	3.50	
Social service workers	6.30	1.54	*	-.26	13.29	1.97	*
Support staff	2.03	1.74			1.38	.93	*
Total number of staff	12.76	9.59			14.87	9.47	*
Percent who supervise staff:							
Child welfare	91%	98%			.29	.14	*
Social service	85%	50%	*	-.36	.36	.51	*
Support	91%	98%			.29	.15	*
Percent of staff:							
Child welfare	42%	66%	*	.47	.26	.20	
Social service	38%	16%	*	-.44	.26	.20	
Support	20%	18%			.14	.08	*

a. "*" indicates significant, two-tailed test ($p < .05$)

Table 8: Student t-tests of mean differences and significant[a] Pearson correlations between tribal/state auspice and services provided

	Means/percents			
Child welfare services (Q=No, 1=Yes)	Tribal	State		Pearson r
Child protective services	94%	92%		
In-home family services	86%	90%		
Intake	86%	82%		
Foster care	78%	90%		
Adoptions	72%	67%		
Residential/Youth home/ Group home services	64%	65%		
Other	17%	24%		
Total number of services	5.00	5.10		
Other direct services (Q=No, 1=Yes)				
Counseling services	94%	80%	*	-.21
Youth groups	75%	27%	*	-.48
Drug & alcohol use and abuse	67%	31%	*	-.36
Recreation	65%	20%	*	-.36
Aging services	61%	2%	*	-.66
Health related services (Home health care)	53%	20%	*	-.34
General Assistance	56%	8%	*	-.52
Probation	39%	6%	*	-.40
Day care	19%	80%	*	.60
Homemakers	56%	49%		
Day treatment	19%	29%		
Low income energy assistance	36%	20%		
Other	14%	10%		
Total number of services	6.44	3.82	*	-.45

a. "*" indicates significant, two-tailed tests ($p < .05$)

Table 9: Student t-tests of mean differences and significant[a] Pearson correlations between tribal/state auspice and supervisory job characteristics

Job characteristics	Means for job responsibilities[b] (n=36) Tribal	(=49) State	r	Means for primary job functions[c] (n=36) Tribal	(n=49) State	r
Supervise casework	2.3	2.9*	.44	58%	88%	.34
Assign cases	2.2	2.8*	.42	58%	86%	.31
Interview & hire caswork staff	2.1	2.8*	.42	53%	80%	.28
Train casework staff	2.0	2.6*	.38	44%	71%	.27
Represent the Agency at tribal council, county board of supervisors, or city council meetings	2.4	1.5*	-.59	50%	18%	-.34
Represent the Agency in the community	2.3	2.1		67%	43%	-.24
Budget development	2.2	1.2*	-.61	53%	2%	-.59
Agency planning	2.1	1.3*	-.51	44%	2%	-.52
Supervise grants	2.0	1.0*	-.66	42%	0%	-.54
Write grants	1.9	1.0*	-.66	31%	0%	-.45
Fund raising	1.6	1.0*	-.52	17%	0%	-.32
Write reports on program activities	2.5	1.7*	-.52	75%	20%	-.54
Establishing:						
program procedures	2.4	1.8*	-.45	64%	18%	-.46
program policies	2.2	1.6*	-.43	56%	12%	-.46
Expenditures:						
Account for them	2.3	1.7*	-.35	50%	22%	-.29
Control them	2.2	1.7*	-.30	47%	29%	
Contract negotiation	1.7	1.1*	-.41	25%	6%	-.27
Handle media and public information programs	1.7	1.7		22%	12%	
Career counseling	1.7	1.6		31%	18%	
Total number of:						
responsibilities	14.0	10.3*	-.42			
primary tasks	8.9	5.3*	-.43			

a. "*" indicates significant, two-tailed test ($p < .05$)

b. Scale: 1= No or infrequent responsibility 2= Some participation but not total responsibility 3= Total responsibility for getting activity done

c. Scale: 0= No, 1= Yes

Table 10: Student t-tests and significant[a] Pearson correlations between tribal/ state auspice and supervisory authority

13 Areas of supervisory authority[b]	Means Tribal	State	Pearson r
You hire/select workers for your unit.	2.2	2.8 *	.49
You give verbal evaluations of each worker's job performance.	2.6	2.9 *	.33
You write formal evaluations of each worker's job performance.	2.6	2.9 *	.32
If there is a dispute between you and a worker, you may make the final decision.	2.1	2.4 *	.26
You may change a worker's tasks.	2.5	2.8 *	.25
You assign the specific tasks that each worker is to perform.	2.6	2.9 *	.24
You may upgrade or downgrade the pay-scale for a worker.	2.0	1.4 *	-.48
You may transfer a worker to another part of the agency.	1.9	1.5 *	-.26
You arrange training programs for your workers.	2.6	2.2 *	-.24
You may promote or demote a worker.	2.1	1.8	
You may dismiss a worker given due process.	2.3	2.2	
You may veto having a specific worker placed in your unit.	2.0	2.2	
Total number of supervisory areas:			
1. Not involved in	1.8	1.9	
2. Make a recommendation only	4.8	4.0	
3. Make the decision	6.3	6.9	

a. "*" indicates significant, two-tailed test ($p < .05$)
b. Scores for each item: (1) You are not involved with this type of decision, (2) You make a recommendation to your boss, but you do not make the final decision, and (3) You make the final decision for this task.

Table 11: Student t-tests of mean differences and significant[a] Pearson correlationsbetween tribal/state auspice and performance evaluation of supervisors

Performance evaluation of supervisors [b]	Means: Tribal	Means: State		Pearson r
Performance criteria:				
How much work your work unit accomplishes	71%	57%		
How many people you supervise	45%	48%		
How many other tasks you do beyond direct supervison	61%	76%		
How close you came to the goals set in your last performance evaluation	73%	78%		
Can your performance be evaluated objectively?	85%	57%	*	-.29
Is your performance evaluated objectively?	59%	41%		
Do you receive annual cost-of-living raises?	44%	17%		-.30
Can you also receive merit or performance raises?	39%	58%		

a. "*" indicates significant, two-tailed test ($p < .05$)
b. Scores for all questions: (0) No (1) Yes.

Table 12: Student t-tests of mean differences and significant[a] Pearson correlations between tribal/state auspice and supervisors' performance evaluation of their child welfare staff

	Means		
Performance evaluation of staff [b]	Tribal	State	Pearson r
Performance criteria:			
How much work the worker accomplishes	73%	77%	
How many people were on the worker's caseload	69%	63%	
How many other tasks the worker performed beyond caseload work	77%	71%	
How close the worker came to the goals set in his/her last performance evaluation	74%	81%	
Can a worker's performance be evaluated objectively?	81%	69%	
Is the worker's performance evaluated objectively?	75%	63%	
Do your workers receive annual cost-of-living raises?	42%	17%	-.27
May your workers also receive merit or performance raises?	38%	54%	

a. "*" indicates significant, two-tailed test ($p < .05$)
b. Scores for all questions: (0) No (1) Yes.

Table 13: Percentage distributions, Student t-tests of mean differences and significant[a] Pearson correlations between tribal/state auspice and satisfaction

	Percentages		Means		
Satisfaction with:	Tribal	State	Tribal	State	Pearson r
Career ladder			63%	41% *	-.22
0. Dissatisfied	37%	59%			
1. Satisfied	63%	41%			
Pay			46%	16% *	-.32
0. Dissatisfied	54%	84%			
1. Satisfied	46%	16%			
Responsibilities of being a supervisor			91%	88%	
0. Dissatisfied	9%	12%			
1. Satisfied	91%	88%			
Co-worker relationships			89%	94%	
0. Dissatisfied	11%	6%			
1. Satisfied	89%	94%			
Activities of being a supervisor			86%	96%	
0. Dissatisfied	14%	4%			
1. Satisfied	86%	96%			
Your performance as a supervisor			79%	92%	
0. Dissatisfied	21%	8%			
1. Satisfied	79%	92%			
Performance of workers in your unit			78%	90%	
0. Dissatisfied	22%	10%			
1. Satisfied	78%	90%			
Amount of supervisory authority			76%	79%	
0. Dissatisfied	24%	21%			
1. Satisfied	76%	79%			
Your job overall			91%	92%	
0. Dissatisfied	9%	8%			
1. Satisfied	91%	92%			

a. "*" indicates significant, two-tailed test ($p < .05$)

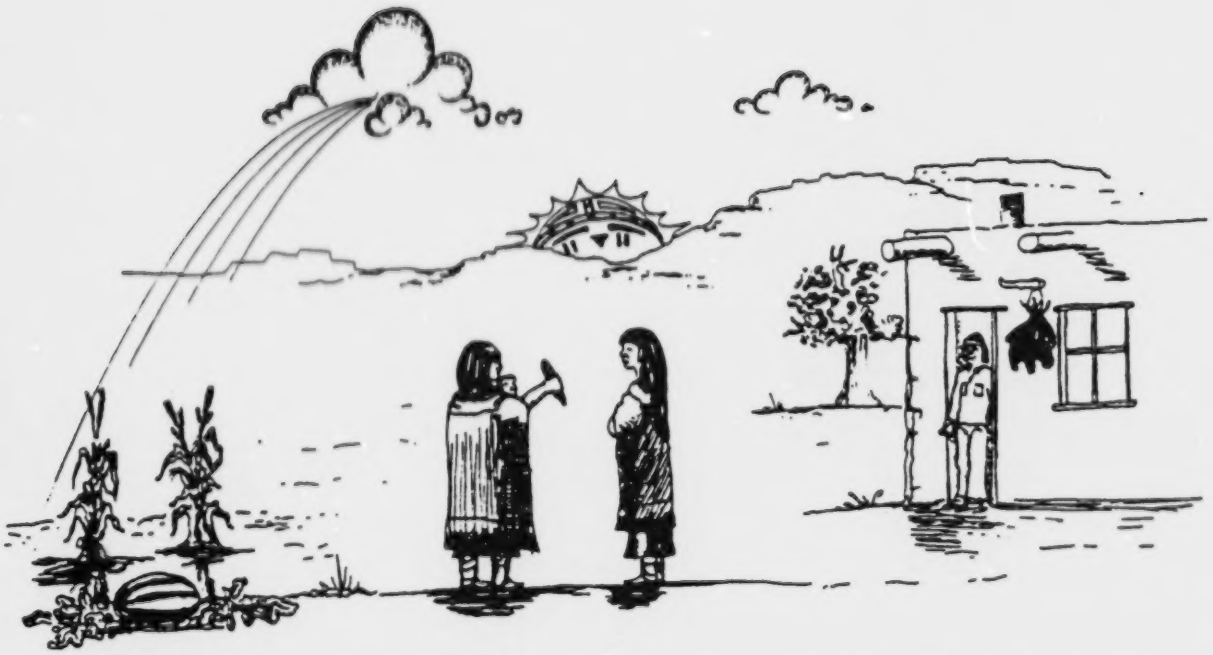
Table 14: Student t-tests and significant[a] Pearson correlations between tribal/ state auspice and job training

28 Training Areas	% receiving training			% trained at agency			% wanting more training		
	Tribal	State	r	Tribal	State	r	Tribal	State	r
Staff motivation	38	44		6	31*	.31	83	63*	-.22
Staff training	44	45		17	39*	.24	78	57*	-.22
Grant writing	23	4*	-.29	6	0		75	14*	-.61
Agency communication	26	32		14	24		72	43*	-.29
Budget methods	38	9*	-.36	17	8		69	26*	-.43
Report writing skills	26	15		8	8		61	18*	-.44
Handling discipline	41	49		6	41*	.40	81	63	
Personal computer skills	32	75*	.42	3	65*	.63	78	61	
Staff performance review	41	68*	.27	6	63*	.59	75	55	
Time management	56	32*	-.24	11	22		75	51	
Supervision	53	79*	.28	3	55*	.55	69	73	
Burn-out prevention	35	36		0	22*	.33	69	49	
Staff hire/fire	35	50		8	41*	.36	66	49	
Child Welfare Court & legal procedures	62	68		8	63*	.55	75	55	
Tribal governance, laws & regulations	53	36		17	24		72	22*	-.50
Inter-State Compact Act	29	24		6	22*	.23	72	27*	-.45
State Governance, laws & regulations	31	53*	.22	0	41*	.48	67	43*	-.24
Indian Child Welfare Act	62	36*	-.25	11	27		64	18*	-.46
Dealing with media	9	9		0	4		63	41*	-.23
Adoption	32	34		8	29*	.25	78	27*	-.51
Foster care	56	49		14	43*	.31	78	29*	-.49
Case management/ case planning	59	64		11	57*	.47	78	57*	-.22
Crisis intervention	41	36		6	22*	.23	78	51*	-.27
Drug/alcohol use & abuse	70	65		14	33*	.22	78	45*	-.33
Family counseling	50	30		6	8		72	35*	-.37
Child development	62	28*	-.34	11	12		69	29*	-.41
Family planning	29	4*	-.35	0	0		61	8*	-.57
CPS investigations	56	53		0	47*	.52	61	48*	
Number of:									
Training received	11	11							
Training at agency				2	9*	.64			
Training types wanted							20	11	-.48

a. "*" indicates significant, two-tailed test ($p < .05$)

CHAPTER 1

THE COMPREHENSIVE CHILD WELFARE SYSTEM



"We present to you this new born child. Please give this child your blessing of the fullness of life, health and well-being, freedom from disablement, so that he may pass away into sleep an old man. He will be called by these names..."

Prepared by:

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Consultant on American Indian Policy

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THE COMPREHENSIVE CHILD WELFARE SYSTEM

GENERAL INTRODUCTION

This manual is intended to be used by several different audiences. First, this manual is intended to be used by supervisors of child welfare workers who work with Indian families and communities. Second, this manual is intended for training supervisors of Indian child welfare workers. Finally, this manual is intended for use in teaching child welfare coursework in schools of social work.

The child welfare needs of Indian families are not much different from the needs of the general population: support and assistance for the family in times of emotional and economic stress. However, there are several basic areas of knowledge that a supervisor must be aware of in working with Indian communities: tribal governments, tribal culture, and community resources.

Tribal governments are distinct political entities that exercise civil and criminal jurisdiction on Indian lands. Tribes maintain direct political relationships with the federal government and are not political subdivisions of state governments. The relationship between the federal and tribal governments is recognized in the United States Constitution, in treaties between the United States and tribes, in federal and tribal laws, and in United States Supreme Court decisions. Tribal governments retain jurisdiction over Indian family and child welfare civil matters. The primary jurisdiction of tribal governments in child welfare matters was reaffirmed by the Indian Child Welfare Act of 1978.[1] Tribal governments operate human elements of child welfare services on Indian lands. In addition to delivering services directly, tribes coordinate services with federal, state, county and private child welfare agencies. One of the tasks of child welfare supervision is to build relationships among service providers and to coordinate scarce resources to serve the needs of Indian families. Working relationships between tribal governments and federal, state and county governments are most successful when approached in terms of intergovernmental relationships. The existence of tribal governments as a means of self-government has been essential to the continued survival of distinct tribal communities and cultures.[2]

The supervisor must make an effort to understand the particular culture of the tribal community within which he or she is working. Each tribe has its own distinct culture. There is no such thing as "the Indian language," or "the Indian culture," Hollywood stereotypes notwithstanding. The Navajo people are as different from their neighbors, the Hopi, as Germans are from the French in language, beliefs, kinship patterns, and social organization. Each tribe has specific values regarding families and children, and an understanding of those values is essential for effective Indian child welfare casework.

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[1]Indian Child Welfare Act, 1978 (Public Law 95-608).

[2]Indian Self-determination and Education Assistance Act of 1975 (Public Law 93-638; 25 USC 450).

In addition, one must resist any temptation to stereotype particular Indian communities as "traditional" or "assimilated." Indian communities have been subjected to tremendous pressures for cultural, economic change during the past five hundred years. These pressures have included competition for land and natural resources, destruction of natural resources and warfare. The pressure on Indian families has included forced attendance of children at federal off-reservation boarding schools which were designed to remove Indian children from their families and their communities in an attempt to assimilate Indian children into non-Indian society between the years 1890 and 1970.. During the 1950's, the federal government cooperated with child welfare agencies to remove Indian children from their homes and to meet the non-Indian society's demand for adoptive children. Many of these adoptions were rationalized on the basis that Indian homes were unfit environments in which to raise children. This policy was adopted by some religious organizations during the 1950's and 1960's. In spite of the pressure for change, Indian communities have survived; indeed they have maintained distinct ethnic identities and tribal forms of social organization and self-government. Indian communities have adopted elements from non-Indian societies and have also influenced non-Indian society. Even within individual tribes, there is often a wide variety of views and practices regarding religion, employment and family life. Therefore, in one's efforts to understand the values of the community with which one is working, it is important to keep in mind the history of the community and the dynamic nature of interaction between tribal and non-Indian communities.

Finally, it is important to understand the resources available that affect families and children in the community and that comprise a child welfare system. There are several different environments for Indian child welfare casework. Community environments include Indian reservation lands, which may be rural and isolated. Some examples would include the Hopi tribe in Arizona, the Spokane Indian Reservation in Washington, and the Mississippi Band of Choctaws in Mississippi. Other Indian reservation communities may be located near urban areas and may have relatively extensive development. Examples of these include the Salt River Pima-Maricopa Indian Community located adjacent to Scottsdale, Arizona and the Reno-Sparks Indian Tribe, whose lands are located in downtown Reno, Nevada. In addition to reservation communities, Indian communities may be located in urban areas such as Phoenix, Arizona and Lincoln, Nebraska. In some of the larger urban areas, Indian communities have organized Indian centers as both service delivery centers and centers for intertribal social events (See also chapter 5, "Management"). Also in urban areas are urban Indian health clinics funded by the Indian Health Service. The institutional settings for Indian child welfare casework may include:

- Tribal government human services programs.
- Bureau of Indian Affairs social services program.
- Urban Indian center social services programs.
- Tribal or state child protective services programs.
- County-administered human services programs.
- Private child welfare agencies.

- School social worker.
- Medical social worker.

We define Indian child welfare services in a broad and comprehensive manner and we recognize that casework, however essential, is only one element in a *comprehensive child welfare system*. The other elements of the child welfare system include:

- The child's immediate and extended family, friends and neighbors.
- Head Start programs.
- Women, Infant's and Children's (WIC) nutrition programs.
- Indian health clinics, especially prenatal clinics, well baby clinics, and pediatric clinics.
- Elementary and secondary schools including reservation public schools, Bureau of Indian Affairs schools, tribal contract schools, and Christian mission schools.
- Tribal law enforcement, tribal courts, and juvenile probation services.

It is the hope of the authors that supervisors of Indian child welfare workers will be able to use this publication as a practical reference manual for working with tribal governments and Indian communities in planning and managing child welfare programs and in supervising caseworkers.

I. ORIENTATION TO TRIBAL GOVERNMENT: Overview of tribal governments; roles of tribal governments in child welfare services; development of child welfare services among tribal governments in Arizona.

A. INTRODUCTION

There are 310 federally recognized Indian tribal governments located in 30 of the lower 48 states. There are also 197 Native villages in Alaska. American Indians and Alaska Natives occupy 42 million acres of tribal land and 10 million acres of land held in individual trust accounts.

The 1980 census reported a total American Indian population of 1.5 million. Roughly half that number were living on Indian lands in 1980. The American Indian population is one of the fastest growing population groups in America. The Indian Health Service estimates that the Indian population is growing at a rate of 2.7% per year.[3]

According to the Bureau of Indian Affairs and information based on preliminary 1990 census figures, there were 949,000 Indian people living on, or near, Indian reservations in 1989.[4] Of this total, approximately 314,000 (33%) were under age 16. In demographic terms, the Indian reservation population is "young." This is due partly to the high birth rate on Indian lands. However, it also is due to the need of many young Indian adults to move away from the reservation to urban areas in order to find work. Often they leave their children behind in the care of the other parent or relatives.

Indian reservation populations range in size from the tiny rancherias in California, many of which have only a few residents, to the Navajo Nation, which has lands located in the states of Arizona, New Mexico, Utah and a population of over 200,000 residents.

B. TRIBAL GOVERNMENTS

Tribal governments are distinct entities that maintain direct political relationships with the Federal government. They are not political subdivisions of state governments. The relationship between the Federal government and tribal governments is recognized in the United States Constitution and in Federal and tribal laws.[5]

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[3] Indian Health Service, *Trends in Indian Health*, 1989.

[4] Bureau of Indian Affairs, *Local Estimates of Resident Indian Population and Labor Force Estimates*, January, 1989.

[5] Felix Cohen, *Handbook of Federal Indian Law.* D'Arcy McNickle, *They Came Here First* and *Native American Tribalism.* For history of governments in Arizona, see Edward Spicer, *Cycles of Conquest.*

Each tribal government is governed generally by an elected body, usually a tribal council. In most tribes, the top elected official -- chairman, governor or president -- exercises executive powers. Most tribes have established local judiciary systems. For tribes that have not established tribal courts, the Bureau of Indian Affairs operates courts established through the "CFR" (Code of Federal Regulations).

Most tribes maintain a wide variety of governmental functions on Indian lands, including:

- *General governmental and administrative operations*: tribal council, law enforcement, judicial system, planning, financial management, property management, procurement and personnel.
- *Community and economic development*: housing rehabilitation, building maintenance, utilities systems, economic development planning and enterprises.
- *Human services*: social services, child welfare services, elderly services programs, health clinics and community nursing programs, commodity food distribution centers, nutrition programs (WIC: Women, Infants and Children), employment training, and alcohol and drug treatment.
- *Natural resource management:* land use planning and management of specific resources, *e.g.*, forestry, agriculture, range lands, minerals, game and fish, water.
- *Education*: Head Start, educational counseling, tutoring, summer youth programs, adult education and higher education scholarships. In addition, some tribes operate or support the operation of elementary, secondary schools and community colleges.

This listing of tribal functions illustrates the diversity and complexity of tribal government responsibilities. The specific functions of an individual tribal governmental unit depends upon the size of the tribe's population, its land base and resources, its sources of income and the needs and interests of its citizens.

C. TRIBAL HUMAN SERVICES PROGRAMS

In the last twenty years, between 1970 and 1990, tribal governments made remarkable progress in the operation of their own human service programs. Tribal human service systems developed rapidly after the Indian Self-Determination Act of 1975. Before passage of the Self-Determination Act, most human services on Indian lands were provided by Federal employees working either for the Bureau of Indian Affairs (BIA) or the Indian Health Service (IHS).

1. Bureau of Indian Affairs Funding for Tribal Social Services

The BIA is a part of the United States Department of the Interior. The Department of the Interior was established in 1849. In that year, Federal executive responsibilities were transferred from the War Department to the Department of the Interior. Human services provided by the BIA initially were authorized by the Snyder Act of 1934 and, along with the provisions under the Indian Child Welfare Act of 1978, comprise the principal sources of funding.

In Fiscal Year 1990, the BIA employed 12,000 staff and had a total budget of approximately $1.3 billion. Of the $1.3 billion, approximately $115 million was spent for social services.

Of the $115 million for social services, the BIA allocated approximately $24 million for social services programs operated on Indian lands by BIA Agencies (the most local component of the BIA bureaucracy) and by tribal governments through contracts made under the Self-Determination Act. Over half of the BIA social services programs on Indian lands are operated by tribal governments also under authority of the Indian Self-Determination Act through contracts administered by the BIA.

The BIA allocated $2.2 million for social services administrators located at the Central Office in Washington, DC, and in twelve Area Offices located around the country.

Welfare Assistance grants accounted for $89 million including:

- General Assistance payments to individuals and families ($51 million),
- Adult custodial care ($11 million),
- Child welfare assistance payments including foster home care and residential care for handicapped children ($16 million),
- Indian Child Welfare Act grants ($8.9 million),
- Burial assistance and emergency assistance ($1 million), and
- Tribal Work Experience Programs ($1 million).

2. Indian Health Service Funding for Tribal Health Programs

The IHS is a component of the Public Health Service in the Department of Health and Human Services. The BIA was responsible for Indian health care until 1954, when an Act of Congress, Public Law 959, transferred the responsibility to the Public Health Service.[6]

The IHS administers hospitals, clinics and community health programs on Indian lands in 31 states. In addition to providing direct services in IHS facilities, the IHS purchases services from private providers under the Contract Health Services (CHS) program. During 1990 the IHS had an annual budget of close to $1.2 billion for health services and $65 million for health facilities construction; it employs 12,000 people.

In 1990 the IHS operated 43 hospitals and 131 outpatient facilities. Tribal organizations operated 7 hospitals and 313 outpatient facilities under authorization of the Self-Determination Act through contracts with the IHS. In addition, tribes provided Community Health Representatives (CHR) through programs which employed Indian people to provide community health outreach services and to bridge the communications gap between Indian people and health professionals.

3. Indian Self-Determination and Education Assistance Act

The Indian Self-Determination Act (Public Law 93-638) was approved on January 4, 1975. The description of the Act is:

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[6] Act of August 5, 1954 (68 stat. 674; 42 USC 2000 *et. seq.*)

To provide maximum Indian participation in the government and education of the Indian people; to provide for the full participation of Indian tribes in programs and services conducted by the Federal government for Indians and to encourage the development of human resources of the Indian people; to establish a program of assistance to upgrade Indian education; to support the right of Indian citizens to control their own educational activities; and for other purposes.[7]

The Act directs the Secretaries of Interior, and Health and Human Services, to enter into contracts, at the request of tribal governments, to operate programs that otherwise would be operated by the BIA or the IHS.

Prior to the passage of the Self-Determination Act, tribal governments had very few resources with which to provide services to tribal members. A very small number of tribes received annual royalties from the sale of oil, gas or timber or the lease of tribal lands for rights of way, agriculture or grazing. Some tribes used their royalty revenues to establish scholarship programs to encourage young tribal members to attend college.

In the 1960's, tribes received funding under the Office of Economic Opportunity Act for Community Action Programs, Neighborhood Youth Corps and Head Start Programs. The Community Action and Head Start Programs enabled tribal governments to gain valuable experience in program planning, service delivery and community development.

4. The Development of Human Services Programs Among Tribal Governments in Arizona

In Arizona, prior to 1975, only one tribe operated its own social services program. The Salt River Pima-Maricopa Indian Community had entered into a demonstration program with the BIA under the authority of the Buy Indian Act.[8] Soon after enactment of the Self-Determination Act, other tribes expressed interest in contracting social services programs, but there were few sources available for technical assistance.

In the late 1970's, the Inter Tribal Council of Arizona (ITCA) entered into a demonstration program (under Section 1115 of the Social Security Act) with the Arizona Human Development Services. The purpose of the project was to demonstrate that, given access to Social Security Act Title XX dollars, tribal governments would deliver quality human services on Indian lands. The role of the State of Arizona was to pass through a portion of the State's allocation of Title XX dollars to the tribes and to administer state/tribal intergovernmental agreements. The role of ITCA was to provide technical assistance to tribes in planning and operating human service programs, and to assist state officials to work cooperatively with tribal governments.[9]

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[7] *Indian Self-Determination and Education Assistance Act of 1975* (Public Law 93-638; 25 USC 450).

[8] Interview with Robert R. Lewis, Director of Health and Human Services, Salt River Pima-Maricopa Indian Community, 1990

[9] Inter Tribal Council of Arizona, *Final Report of the 1115 Project*, 1984.

An important additional benefit was that ITCA was able to provide technical assistance to tribes that were interested in contracting with the BIA to operate social services programs. Between 1980 and 1990, the number of tribes contracting with the BIA to operate social services programs in Arizona increased from one to nineteen. The technical assistance and support that ITCA provided to the tribes was a major factor in this increase.

ITCA assisted all twenty tribes to obtain Title XX (Social Services Block Grant) funds.[10] Tribes in Arizona have over ten years experience successfully operating Social Services Block Grant programs. Every tribe in Arizona uses its Social Services Block Grants to enhance either child welfare services or services for the elderly.

The ITCA and the State of Arizona developed an allocation formula that allowed all tribes to receive a base amount of funding plus an amount determined by population. This "base plus population" method ensured that all tribes, including tribes with small populations, had sufficient resources to operate a social services program. The State set aside the allocation for the tribes and allowed time for careful planning. Since each tribe had a specific allotment, there was no competition. Therefore, tribes were able to conduct planning based upon real needs and to depend upon a certain amount of money.

Technical assistance in planning and professional consultation in casework for the Title XX dollars was provided by the ITCA. In addition, the ITCA staff, as part of its Title XX technical assistance effort, assisted tribes in conducting human services inventories (described later in this chapter). Therefore, the technical assistance effort was also a capacity-building effort for tribal governments.

The Self-Determination Act has been important to the development of tribal human services programs. As tribes have taken over social services programs, they have changed BIA service priorities. For instance, the BIA Manual places a high priority for resources based on the number of General Assistance cases, the number of children in out-of-home care and the number of elderly and disabled people placed in custodial care institutions. The BIA Manual places a low priority based on "service only," that is, casework that is needed to enable children to remain with their families or to assist an elderly person to continue living at home.

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[10] In 1981, Title XX of the Social Security Act was turned into a Social Services Block Grant by the Omnibus Budget Reconciliation Act of 1981 (Public Law 97-35).

In contrast, as tribes have taken over their social services programs, they have emphasized support services, rather than numbers of cases, to keep Indian families intact. Tribal support services for Indian children and families are financed by a variety of sources:

- Social services casework and child welfare assistance payments (funded by BIA),
- Indian Child Welfare Act grants (funded by BIA),
- BIA funded elementary and secondary schools,
- Johnson-O'Malley supplementary educational services (funded by BIA),
- Head Start (funded by the Department of Health and Human Services),
- Women's, Infant's and Children's nutrition program (funded by the United States Department of Agriculture),
- Summer Youth Employment Program (funded by the Department of Labor).

II. CASEWORK SUPERVISION

A. OVERVIEW OF CASEWORK PRACTICE

It is rare to find a tribal human services program that is staffed by experienced social workers who have master's degrees in social work. Usually, the staff consists of Indian paraprofessionals who may have some schooling at the college level and some casework experience. The task of the Indian child welfare supervisor is to provide casework supervision *and training* for the staff.[11]

There are several reasons for the lack of trained social workers on Indian lands. The first is that there are not enough Indian people who have graduated from schools of social work with bachelors or masters degrees. Serious efforts have been made by Arizona State University and other schools to recruit and retain Indian students, including alternative outreach education.[12] However, much remains to be done.

Second, the funding for Indian social services and child welfare programs is seriously inadequate.

Third, social institutions take time to develop, mature and "settle down." There has been rapid change in the control of social services on Indian lands during its twenty year passage from the Federal Bureau of Indian Affairs control to the tribal government. Furthermore, there has been rapid growth in the resources that have been developed and in the types of services provided by tribal governments on Indian lands. For a comprehensive discussion on these changes, please refer to the section on "Orientation to Tribal Government," in this chapter.

The probability is becoming greater that a supervisor will inherit a well-trained and experienced staff. Even so, the following outline is necessary and helpful for the purposes of a training manual such as this. The task of the supervisor is to prepare thoroughly child welfare workers to be proficient in the fundamentals of family and child welfare casework:

- It is important to conduct a careful analysis of the problem in order to learn about the presenting problem, the source of the referral and the child's home.
- The presenting problem is not always the real problem, therefore, a careful analysis of the family situation is important.
- A good case plan will follow from a careful analysis of the family situation.

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[11]The author wishes to acknowledge the substantial contribution of Ms. Ruth Houghton, MSW, to the section on casework supervision. Ms. Houghton is a social worker who served as the Director of Human Services Programs for the Inter Tribal Council of Arizona, Inc., and who assisted most of the tribal governments in Arizona to plan and implement social services programs.

[12]Interview with Edwin Gonzalez-Santin, MSW, Professor, Humboldt State University, Arcata, California.

This problem solving method systematically shows a supervisor how to teach good casework.

1. Analysis of the Problem

a. *Examples of presenting problem*

- A child is picked up by the tribal police because he or she has run away from home.
- A child is picked up by Child Protective Services and is reported abandoned at a shopping mall in a city off the reservation.
- The school reports that the child is coming to school dirty and hungry.

b. *Examples of sources of referral*

- Tribal police.
- State Child Protective Services Agency.
- School teacher or principal.

c. *Information about the child's home*

- Household composition.
- Names, ages and relationships of residents.
- Source(s) of family income.
- Homeowner: family (including extended family) member or landlord.
- Informal community supports available to the family (Examples: relatives, friends, minister).
- Formal supports available to the family (Examples: Head Start or day care program; community health nurse; WIC program).

A careful analysis of the family situation may show that in the case of the runaway child, the child is not the problem, the family is the problem, and the child is attempting to escape a difficult situation. For example, an analysis of the family situation might reveal that the head of household has been laid off from his job, and the family is suffering from financial stress.

In the case of the "abandoned" child, a closer look may show that the child wandered off to look at toys in a department store, got lost and the family was unable to locate the child.

In the case of the child coming to school dirty and hungry, a home visit may reveal that the father is absent, the mother is sick and unable to care adequately for the needs of the child.

Too often, the basic questions about a family situation are forgotten, especially by people who have no casework experience. For example, several years ago, the director of the Bureau of Indian Affairs Social Services program held a meeting with field social workers. He gave them a hypothetical case of child abuse and provided what he thought were the key factors: the child's injuries, the police report and the charges against the parents. Then he turned to one of the social workers and asked in a haughty manner, "and what is the first thing you would do in this case, Miss Social Worker?" An experienced caseworker, she calmly answered, "The first thing I would do is find out the child's name." One may appreciate the pin-prick irony in this *non sequitur*, a telling point for those who allow themselves to become remote from the daily practice of direct service.

2. Case Plan

The case plan always should be developed jointly with the child's family. If the parents are not immediately available, grandparents, aunts and uncles or adult siblings can and, maybe, should be engaged. The case plan should include short term, long term and the ultimate goals. This produces a case plan which can be used as a flexible guide to working with the family and not a rigid schedule to be met, "or else." But "flexibility" should not be confused with lack of professional case records. The case plan should be clearly written, detailed and logically related to the written analysis of the problem.

a. *Short term goals*

These consist of immediate actions designed to ameliorate the problem, necessary for the protection of the child or the children.

In the example of the runaway child, the short term goal would be to restore income to the family through Food Stamps, Aid to Families with Dependent Children (AFDC) or other types of contingency planning, pending longer term goal setting for self determination. In the information on the child's home, it is important to find out whether the homeowner is a family member or a landlord. If the family rents the home, an immediate action would be to negotiate with the landlord to prevent eviction of the family. Fear of eviction and worries about money create stresses for the family and are reflected in the child's behavior. Children often react to stressful situations at home by "acting out" in school or the neighborhood. This makes them targets for superficial labelling as "incorrigible" and consequent placement in juvenile detention. Such actions are often shortsighted and accompanied by tragic consequences.

In the case of the "abandoned" child, the immediate action is to locate the family and send the child home. The caseworker might provide the family with information on how to report lost children in an urban area and encourage the family to talk to the child about wandering off.

In the case of the hungry child, a short term action would be to obtain homemaker services to help the family with meals and laundry.

b. *Long Term Goals*

These consist of long-term or continuing activities that are needed to assist the family to remain intact.

In the case of the "runaway" child, the long term goal would aim for the head of household to obtain employment.

In the case of the "abandoned" child, there would be no long term goals.

In the case of the sick mother and the hungry child, the caseworker can ensure the child's participation in a free or reduced-price lunch program at school and also assist the mother to claim child support from the absent father.

Helping a family to recognize its strengths can be a difficult task, but it is a critical process for the caseworker in preparing a realistic case plan. The family should be encouraged to see that its value on employment and hard work is part of its strength, that

accepting Food Stamps and AFDC payments are only a temporary remedy to aid in the search for steady employment. Families suffering economic or emotional difficulties are already under considerable stress; having to discuss those problems with outsiders adds to the stress. It is important for the caseworker to recognize this issue and then help the family focus on its strengths to identify possible solutions while reducing stress.

3. Working with Families

Hopefully, the child welfare caseworkers themselves will be parents, able to identify with both the challenges and rewards of raising children. Whether or not the caseworkers are parents, it is helpful to review with child welfare caseworkers the basic principles of working with families.

a. ***Understanding the Basic Needs of Children***

Indian children have the same basic needs as all other children for physical and emotional security. The elements of physical and emotional security include:

- Love and nurturing
- Adequate food
- Shelter
- Self-esteem
- Discipline; clear and reasonable limits for acceptable behavior
- A sense of identity and belonging
- Good role models
- Education and health care.

One of the strengths of many Indian communities is that extended families still exist. Learn about the extended family structures in Indian communities. Relatives other than parents often play significant roles in child rearing; a child will have both blood as well as clan relatives. One of the important functions of uncles is their role in providing guidance and discipline.

Extended families are important for a child's sense of identity and belonging. Hopi families include the child's uncle and/or ceremonial father, who have traditional roles in guidance and training. They also include natural and clan brothers and sisters, aunts, uncles, nieces, nephews who ensure a wider base of kinship and companionship and, at the same time, more intensified relationships.[13]

The author, as a child, routinely spent time with his grandparents. His mother, a single parent, "rotated" four children, with each child spending a summer, or even a year at a time with grandparents. This was a healthy arrangement, which allowed the children to form close attachments to the grandparents. The author formed lifelong emotional attachments particularly to his Hopi grandmother and has strong memories of his Hopi great grandmother.

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[13] For discussions of Hopi families, see Helen Sekaquaptewa as told to Louise Udall, *Me and Mine*, and Polingaysi Qooyawyma, *No Turning Back*.

Grandparents, aunts and uncles, in addition to parents, (in the Hopi kinship system, mother's blood and clan sisters, father's blood and clan brothers assume and retain parental roles to their collective offspring) all can provide important nurturing for children. Adult relatives can give a child special attention, which is important for the child's self-esteem and intellectual growth. Being the "favorite" nephew, niece or (in the case of Hopi tradition) a ceremonial child can be important to a child, particularly the child of a family which may not have the means to provide beyond basic sustenance. Such a special relationship can present enriching experiences not readily available from the natural parents.

Adult relatives can teach lessons to the child that the parent may not have the energy to provide. These lessons may include not only "how to behave," but also how to perform important tasks that are necessary to the economy of the family: chopping wood, hauling water, hunting and fishing, repairing automobiles, fixing leaky faucets.

Where do we learn how to raise children? We learn from watching those around us. We learn from asking questions or accepting guidance. We learn from reading books. But most importantly, we learn from our memories of how our parents raised us. Tragically, significant numbers of Indian parents have been undermined in their capacity to be role models. Many Indian people grew up in Federal boarding schools during the early and mid-20th century; they have few memories of being raised by parents because they were raised by dormitory matrons and disciplinarians.

This situation reflects the federal policy governing the education of American Indians. The results of this policy are that in most Indian communities, Federal boarding schools replaced in significant degree the role of the family and altered its natural functioning during the early to mid-1900's.

Indian people reaching school age during the enforcement of U.S. assimilation policy through education, spent all of the formative learning years in Federal boarding schools. When they had children, they sent their children to boarding schools. For many this pattern persisted for three or four generations. The replacement became the mechanism for the systematic creation of an artificial, institutional "family" culture for generations of people whose natural relationships and systems were largely displaced, destroyed or altered beyond recognition.

Finally, during the 1980's the Bureau of Indian Affairs, unilaterally, began to close some of the off-reservation boarding schools, having decided, in a cavalier twist of irony, that "Indian children are better off at home." Finally forced to raise their children because of the closure of boarding schools or because the child returned home, the parents often were either totally permissive or harsh disciplinarians or both.

The Federal government made no attempt to work with Indian communities to prepare them for the return of substantial numbers of children to community and family structures which had long since lost their dominion. No efforts were made to assist Indian communities to develop child welfare services. In some Indian communities where the families had sent their children to off-reservation boarding schools for several generations,

they simply changed the focus of their expectations. Instead of relying upon the Federal government to raise their children, the Indian families turned to the tribal government to raise their children. Tribal educational agency staff filled a role it saw for itself by taking children on camping and field trips; tribal juvenile probation staff were expected to provide discipline when parents lost control of their children.

These responses, inappropriate by any standard, reflect on how important it is for tribal child welfare programs to avoid the temptation to replace the role of Indian parents and, instead, to assist Indian families to regain their original family relationships and roles, if possible, or to form responsive structures and systems, if necessary.

In many Indian communities, one of the tasks is for families to learn again how to function: for the parents to learn how to be parents and for the children to learn how to be children, within the context of community culture, values and practice. While this problem may be exacerbated in Indian communities because of Federal Boarding schools or policies which encouraged the breakup of Indian families, family dysfunctioning, as a social phenomenon, is not unique to Indian families. In anticipation of childbirth this author attended a childbirth class with his wife. The last session of the childbirth class covered the basics of how to care for the baby when the parents take him home. The instructor described how to hold the baby, how to wrap babies in blankets, how to feed the baby and how to change diapers. This was not a class for Indian parents. This was a class for mostly non-Indian, upper-income, professional people. The point is that, with the breakup of extended families, grandmothers and aunts have been replaced by Lamaze classes and child care instructors.

b. ***Understanding the Basic Needs of Parents***

Parents have the same needs for physical and emotional security as the children, except at an adult level. Parents also need information about parenting and the care for children. Ideally, this information should be provided by extended family members who are supposed to know these things. This information can be supplemented by public health nurses, Head Start teachers, WIC outreach workers and by child welfare caseworkers.

Parents themselves need health care. Parents who are ill seldom have the energy and patience for good parenting skills. Parents need community support for the responsibility of being a parent. In the general society, community recognition of the importance of parenting is diminishing in relation to values on employment status, income and possessions. Although the United States may be a "first world" nation in economic, military and political terms, we are a "third world" nation in terms of social and public policies of support for the family, maternity and paternity leave, child care, and access to prenatal care for low-income families.

4. Basic Principles of Child Welfare Casework

Children should live in supportive, nurturing environments preferably with their own families. The case plan should emphasize helping a family remain intact and solve its own problems as much as possible.

A day is a long time in the life of a child. Therefore, speed is essential in working with children. If, after much effort, the child's home setting does not improve, some permanent plan should be made for the child's care so that he or she is not left "in limbo." This relates again to the importance of having a sense of identity and belonging, an important element of emotional security.

In Indian communities, a permanent guardianship arrangement often is preferable to a formal adoption. Care of children by grandparents or other relatives is not unusual.

Tribal administrations and councils have recognized the need for group home settings as a way of addressing child welfare needs. Unfortunately, one of the problems of Indian child welfare casework on Indian lands is the lack of casework supervision which too often results in Indian children being "warehoused" in institutional settings. Children have been known to continue in "temporary" placements for years. Supervisors should ensure that children are not left in these situations.

Special care must be taken when working in communities where English is not the predominant language. For example, a social work consultant was assisting the White Mountain Apache Tribe in Arizona to plan for a contract with the Bureau of Indian Affairs to operate the social services program.[14] A review of the case records revealed that many Apache children had been removed from their homes. It was suspected that the parents, who were primarily Apache-speaking, did not understand that their children were being removed permanently. The consultant asked the BIA social services supervisor if Apache-speaking translators had been used to explain clearly the reasons for the removal of the children, and the rights and the options of the parents. The BIA supervisor assured the consultant, in front of the tribal council human services committee, that "everyone on this reservation speaks English." Right after the BIA supervisor made that statement, the committee conducted the rest of the meeting in Apache. In most reservation communities, the native language still is the primary language, so it is important to provide for the native tongue; furthermore, in stressful situations, often the first skill to be lost is proficiency in English for people for whom English is a second language.

B. CASE REVIEWS AND CASEWORK EVALUATION

It is important to have written and objective procedures for evaluating casework. Periodic review of written case records is an essential tool for casework supervision.

1. Policies for Case Records

The child welfare agency should have clear, written policies regarding case records. The policies should spell out who has access to the case records and for what purposes. Client confidentiality should be protected.

[14]Interview with Ruth Houghton, November, 1990.

2. Utilizing Case Records for evaluation

The supervisor should ensure that there are clear policies and procedures for case records. The case records should include written, detailed information about the child's home and a detailed analysis of the problem including home study and a detailed case plan containing short term and long term goals. Case records should be updated with each interaction between the caseworker and the family.

The supervisor periodically should review the case records to see if they are clear and detailed. The test should be: "would a fellow social worker be able to pick up this case and understand the family situation from the written record?"

C. CASEWORK CONSULTATION

The supervisor should ensure that consultation is available to the child welfare caseworker. Appendix C is an excellent sample for making referrals.

1. Multidisciplinary Consultation

Multidisciplinary consultation often is required in the following situations:

- Child abuse: the child should be examined by a doctor for evidence of physical abuse.[15]
- Children with special needs: all children should receive Early Periodic Screening and Testing to reveal developmental disabilities.
- Sexual abuse: children should be examined by professionals who are trained to conduct sexual abuse interviews.
- Psychological evaluations should be utilized for children being considered for out-of-home placement.

2. Supervisor Consultation

The supervisor should be available to the caseworker for consultation on cases. The consultation can be an informal, "just talking things over," or formal, assisting the caseworker with difficult cases.

3. Peer Consultation

Fellow caseworkers should be seen as valuable resources based upon their particular experiences and skills:

- Experience with child abuse and neglect
- Bilingual skills
- Knowledge of human services systems such as Supplemental Security Income or Food Stamps

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[15] For a thorough discussion of child abuse defined for public welfare workers in Indian communities, see Gloria Fohrenkam, "Child Abuse and Neglect," in *Collaboration: The Key*, School of Social Work, Arizona State University. For detailed procedures for child protective services on Indian lands, see *Indian Child Protective Services Training Academy Manual*, Inter Tribal Council of Arizona.

D. CASEWORK TRAINING

Casework training is an on-going process. This section of the introduction could be entitled "supervision as training." The most effective training is not labelled "training," but is instead part of the everyday process of program operations. The keys to effective training are: clear program goals, clear understanding of staff roles and open communication among staff.

Fifteen years ago, social services on Indian lands were provided by Bureau of Indian Affairs social workers. Most of the BIA social workers had been on the job five, ten or fifteen years. They had extensive field experience, they had settled working relationships and they had clear supervisor / caseworker relationships. Casework was learned from the supervisor and from fellow social workers over a period of years. (Of course, the quality of the services was limited by BIA social services policies which emphasized out-of-home placement of children.)

In the past ten to fifteen years, however, there have been major changes in Indian social services programs. Since 1980, eighteen of the twenty tribal governments in Arizona have contracted with the Bureau of Indian Affairs to operate social services programs. This means that supervisory and casework staff have changed in practically every program. In addition, there have been changes as Indian social workers have replaced paraprofessionals. There have been changes through the addition of new programs funded by sources other than the BIA. Finally, there have been changes in staffing that have resulted from simple, normal staff turnover.

1. On-the-Job Training

The conditions of change described above clearly indicate the need for on-the-job casework training. On-the-job training consists of both formal casework evaluation and informal, everyday casework consultation. On-the-job training is very important because social casework really is learned on-the-job. Casework skills refer to skills in working effectively with people and those skills come with time and experience.

The staff of the Social Services Branch, Bureau of Indian Affairs, Phoenix Area Office, provides valuable training in casework skills to both BIA and tribal social services programs in Arizona, Nevada and Utah. On-going and periodic training in casework skills are vital to respond to the turnover of social services staff because there is still a lack of professional training.

2. Workshops

Workshops can be a valuable source of training for casework staff. Be careful to screen the workshops, however, to ensure that the content is relevant to the work situation and that the trainers themselves have experience and training in the ares that they are presenting.

Professional conferences can be valuable enablers for caseworkers to learn that there are other people in the world who have similar work situations and experiences. Conferences can be valuable for sharing solutions and skills.

A good supervisor will ensure that the caseworkers have opportunities for professional exposure and development beyond the reservation and urban Indian community boundaries.

3. Professional Training

Strong supervisors utilize various resources for professional training. One valuable source is experienced caseworkers who can provide the basics of casework for paraprofessionals. Other resources include experts in child development, family dynamics and substance abuse prevention and treatment. The key to effective utilization of professional trainers is clear identification of training objectives.

One excellent source of professional training is the Indian Child Protective Services Training Academy sponsored jointly by the Arizona Department of Economic Security, Administration for Children, Youth and Families and the Inter Tribal Council of Arizona.

4. Return to School Programs

It is important to encourage paraprofessional social workers to attend school or to return to school to obtain their degrees in social work. Unfortunately, this is not always an easy option, both from the perspective of the program as well as the perspective of the individual.

It is difficult for underfunded programs to budget funds for long-term training. It is also difficult for caseworkers with families to meet both family obligations and the demands of college classwork.

The Arizona State University School of Social Work has experimented with field instruction in order to provide social work foundation courses in rural and reservation areas of Arizona.

E. CHILD CUSTODY PROCEDURES

A tribal government may or may not have formal child custody procedures. Child custody procedures include written legal policies to apply in cases where children need to be removed from the home and placed in out-of-home care for any reason. If the tribe does have such procedures, then the supervisor must train the staff in the use of the procedures.

If the tribe does not have formal procedures, then one of the tasks of the supervisor is to draft procedures. The supervisor may begin by asking for copies of procedures adopted by other tribal governments. The supervisor will want also to incorporate the tribal community's values and philosophy about children and parents into the development of procedures. Attached to the end of this section is Appendix A outlining suggested child welfare codes and standards.

In training staff on existing procedures, the issues of due process and liability need to be emphasized.

Tribal staff should be thoroughly familiar with the Indian Child Welfare Act.

F. PLACEMENT OF CHILDREN

Removing children from their families is serious business. Every effort should be made to assist families to stay together. In cases where children need to be removed from their homes for their safety or protection, there should be clear and convincing proof of the need for such removal.[16]

1. Foster Homes

Only foster homes that have been licensed by the tribe should be utilized. Also, the foster home placements should be carefully and closely supervised. It is not uncommon for foster children to be abused by other children who have been abused. In addition, foster children sometimes are abused by foster parents. Sometimes people volunteer to be foster parents, not out of concern for children, but because the foster care payments may represent cash income. Therefore, careful screening and close supervision are essential.

2. Group Homes

Only group homes that have clear track records of successful management and good service to children should be utilized.

There is often a danger of "warehousing" children in group homes.

3. Placement Supervision

Placements in substitute care should be supervised carefully with periodic visits to the placement site. Close supervision of caseworkers who have placed children in out-of-home care is important to prevent children from staying in placements any longer than absolutely necessary, to ensure that efforts are made to assist the parents to see that the family can be reunited, and to prevent neglect or abuse of the children in the placement setting.

4. Family Services

The caseworker should provide or arrange for services to the family during the time that the child is in out-of-home placement. The services may include substance abuse treatment, employment planning, and personal counseling.

5. Permanency Planning

If, for some reason, a child cannot be returned to his or her biological parents, then the caseworker should make efforts to find permanency. Again, the preference on many Indian reservations is a long-range guardianship arrangement with a close relative. Adoptions to non-Indian families is rarely satisfactory as a long-range solution, particularly when the child reaches adolescence and begins to wonder about his biological family and his background.

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[16] See: Robert Robin, *"Substitute Care,"* Collaboration: The Key.

III. ADMINISTRATIVE SUPERVISION

This section describes the tasks that must be performed by a child welfare services supervisor both to develop a child welfare program and to insure its survival. It is rare to find a situation where the supervisor is able to step into a ready-made program where the funding is guaranteed, the program fully developed and needs simply to be maintained.

Instead, the conventional reality is that the self-determination contract with the Bureau of Indian Affairs to operate the tribe's social services program is underfunded and is facing reductions in the BIA's annual budget request to the Congress. In addition, the Indian Child Welfare Act funding is year-to-year, with no assurance of long-term funding, and dependent upon congressional appropriations. One of the most important tasks of supervision is to keep the staff informed regarding the administration of the program. The key point here is that the caseworkers should be informed clearly about administrative requirements of the program and about administrative changes such as funding changes that may affect them personally. Since enactment of the Indian Child Welfare Act in 1978, the Administration has never requested, and the Congress has never appropriated, more than $9 million dollars to meet the needs required under the mandate of the Indian Child Welfare Act. More than 300 tribes and almost 200 Alaska Native villages are targeted for these funds.[17] The standards for the grant applications and the review criteria are applied differently from one BIA Area Office to another.

Therefore, resource development and program management are critical to the survival of Indian child welfare programs.

A. PROGRAM PLANNING

The child welfare program plan should focus on the realities of the particular Indian community or tribe. The best way to discover the realities of a community is by talking to its members and studying the information available about the community.[18] This section describes program planning based upon community research.

1. Community Resource Inventory

One of the best approaches to planning is the Community Resource Inventory. The inventory consists of identifying all of the resources available for a particular purpose in a particular community, in this case, child welfare services on and near Indian lands. The resource inventory is done by talking to people. An observant planner or supervisor will

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[17]Bureau of Indian Affairs, *Justification of Budget to the United States Congress*, various years. See also, United States Senate, Senate Select Committee on Indian Affairs, *Hearing on the Implementation of the Indian Child Welfare Act of 1978*, 1980.

[18]For a discussion of respectful attitudes in studying communities, see Rosalie Wax, *Doing Fieldwork*. Also, Michael Hughes, "Interview with Robert Coles," unpublished review notes, 1976.

learn a great deal about the community and about child welfare needs in the process of conducting the inventory.

The opportunity to conduct a Community Resource Inventory is an extraordinary privilege and the community being studied should be treated with appropriate respect and protocol. It is one of the few opportunities that a supervisor will ever have, legitimately, to ask a lot of questions about programs, resources and the community. The people being interviewed should be treated with polite respect and the information gathered should be treated as a valuable treasure.

The first step is to obtain the permission of the appropriate authorities on the reservation, generally the tribal chairman or the director of the tribal human services program or division. A legitimate question to anticipate is: "Why are you doing this research and who are you doing it for?" This is an important question to answer, particularly because Indian communities have been the subject of much social research which is rarely accountable to the community.

Next, make a list of all the programs that have anything to do with child welfare services. The list should include the following:

- Tribal or BIA social services
- State or county social services (AFDC, Food Stamps)
- Child protective services, tribal, state, county
- Health services providers
- Schools
- Head Start and day care programs
- Tribal law enforcement
- Tribal court
- Alcohol and substance abuse program
- Tribal housing authority
- Major employers
- Women's Infants and Children's (WIC) nutrition program
- Local churches and representatives of child advocacy organizations

Make a brief list of discussion questions. You do not want to administer a questionnaire. Instead, the objective is to engage the person being interviewed in a general discussion. The order of the questions and answers do not matter as much as the information being provided.

The first several times you use the list of discussion questions, you may want to give a copy of the questions to your informant out of courtesy and respect. After two or three interviews, you should be able to dispense with the list and conduct a more "natural" discussion rather than a structured interview. A sample list of questions is attached in the instructor's section, as Appendix B.

The supervisor / planner should be flexible in asking the questions and tailor the specific questions to the situation. For example, in interviewing a school principal, instead of, "What services does your program provide?" you might ask, "What grades do you serve?"

The supervisor / planner should take detailed notes, and write up descriptions of the program or resource as soon as possible after each interview. The ideal schedule is no more than two programs per day, with a write up of program descriptions on the same or the next day. It is good practice to provide a draft copy of the program description to the person interviewed and to ask him/her for comments and corrections. This insures that you have accurate information, and it lets that person know that you care about the information that he or she has given you.

All of the program descriptions should be compiled into a resource directory, complete with phone numbers, names and titles of program contacts. The resource directory will be a valuable tool for the child welfare caseworkers.

Most importantly, the supervisor / planner will learn a great deal very quickly about available resources and about child welfare needs. Instead of taking six months to learn about all of the community resources, one can learn a great deal in two weeks, using the community resource inventory method. The discipline of writing down the information and compiling the program descriptions will assist the supervisor to memorize information about all of the resources.

Actually, there will be several products from a thorough inventory:

- Detailed descriptions of child welfare service programs and resources.
- A list of child welfare issues in the community as seen from various perspectives.
- A list of contact people with whom to coordinate services.
- A list of unmet child welfare needs, which can form an important basis for program planning.

2. Tribal Jurisdiction

It is essential to understand the jurisdiction of the tribe regarding child welfare matters. First, the broad question:

- Is this a "280" or a "non-280" state?

Public Law 280, passed by the United States Congress in 1953, conferred to states criminal and civil jurisdiction over Indian lands. The law was enacted as part of a broader effort to terminate the political relationship between the United States government and tribal governments, to dissolve tribal land holdings and to assimilate Indian people into non-Indian society. Jurisdiction was conferred on six of ten states submitting petitions: California, Minnesota, Nebraska, Oregon, Washington and Wisconsin.[19]

Coincidentally, it was during the 1950's that Indian children were being removed from their homes at an alarming rate. The philosophy of termination and assimilation helped to legitimize the efforts of the Bureau of Indian Affairs, private social services agencies, and churches in referring Indian children to non-Indian adoptive and / or foster

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[19] Felix Cohen, *Handbook of Federal Indian Law*:; see also, Sid Beane, "Indian Child Welfare Social Policy History," *Collaboration: The Key*, p. 4.

families. It was the lack of legal protection for Indian families that eventually led to the enactment of the Indian Child Welfare Act. [20]

Public Law 280 status does not mean that a tribal government has no jurisdiction. It means that the state is authorized by the Federal government to exercise concurrent jurisdiction on tribal lands. The Indian Child Welfare Act contains provisions for tribal governments to regain exclusive jurisdiction in Indian child custody matters.

The planner / supervisor should determine if the tribe has a child welfare or family welfare code. If so, the supervisor should become familiar with the code. Given their relatively young nationhood, most Indian communities have yet to develop child welfare codes based upon local organizational structures and tribal community values. Therefore, one of the tasks of the supervisor is to work with various organizations and members of the community to develop such a code for adoption by the tribal council. These various elements might include the tribal police, the tribal court judge as well as community residents. Too often, in Indian communities, legal codes are developed in isolation by outside attorneys or consultants who do not take into account organizational structures and values of the community. Instead they utilize "boilerplate" documents or "model" codes, word for word.

3. Tribal Demographics

There are many sources of demographic information on individual tribes. They include:

- *The tribal enrollment office.* This is the most complete source of data regarding *enrolled* tribal members. The enrollment data should include family composition, genealogies, clan affiliation, birthdates, birthplaces and residence. However, the enrollment data will not include non-enrolled tribal residents or residents of the community who are from another tribe or who are not Indian.

- *BIA annual population and labor force estimates.* The labor force data are only *estimates.* They are submitted annually by the BIA Agency Superintendent to the BIA Central Office. Sometimes the data is based upon extrapolations from very reliable sources and sometimes upon guesses and "windshield surveys" of the reservation. The estimates include important age, income and employment categories which are necessary for the understanding of economic conditions.

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[20]William Byler, "The Destruction of Indian Families, *Association on American Indian Affairs*, 197-, and "Indian Child Welfare: Statement of the Problem," unpublished report.

- *Decennial census data.* This is the data available from the national census conducted every ten years. Data can be very detailed and useful. However, one limitation is the problem of undercounting rural, low income and ethnic minority populations. Indian communities have all three characteristics.
- *Indian Health Service statistics.* The Indian Health Service (IHS) has several database systems which can be very valuable but which are rarely used for planning. Out-and in-patient statistics from an IHS clinic can be very useful for learning about patterns, or lack of prenatal care, deliveries (including complications of delivery) and pediatric care.
- *Juvenile court cases.* Granted, the court should not release details of individual cases. However, the tribal court clerk can compile the number of juvenile court cases by type: status offense, child custody; also by other characteristics, for a useful profile.
- *BIA Social Services data.* The number of individuals and cases receiving General Assistance for foster or institutional care.
- *Law enforcement statistics.* Numbers of juvenile cases by type.
- *School enrollment.* Public schools can provide the numbers of Indian children enrolled reflecting counts for Federal program funding requirements for Johnson-O'Malley, Indian Education Act and Impact Aid programs. Schools also should be able to provide numbers of children who have Individual Education Plans (IEPs) required by the Education of All Handicapped Children Act.
- *Head Start enrollment.* In addition to enrollment numbers, the Head Start staff can provide information about children unable to participate because of funding limitations.
- *Aid to Families with Dependent Children (AFDC).* It is important to obtain from the state or county welfare agency the numbers of AFDC cases and recipients residing on Indian lands. This data is a strong indicator of poverty and unemployment. Data should include both the numbers of single-parent and two-parent families and families participating in the Job Opportunities and Basic Skills (JOBS) program. In most states, AFDC recipients are categorically eligible for Food Stamps and Medicaid Benefits.
- *Women's Infant's and Children's (WIC) nutrition program.* The WIC participation statistics will provide data regarding the number of infants and pregnant women in the community.

4. Child Welfare Service Needs

The research and data described above should provide comprehensive information reflecting child welfare needs of an Indian community. It is important to test the conclusions from the data. This should be done by and with community participation. Also seek views from a wide variety of sources. For example, in looking at elementary school populations, talk not only with the school principal, but also with teachers, teacher aides, the school

nurse, the bus drivers and the cooks to get a complete picture of the community from many different sources.

In talking with tribal law enforcement officers, it is important to spend some time with them to learn more about their point of view. Spend a half day riding on patrol with the officers.

Encourage and assist a community to think about its child welfare needs from various perspectives. In the section on "Casework Supervision," we stated that an analysis of the problem is important because the presenting problem is not always the real, underlying problem. This can be as true on a community level as it is on a family level. For example, a social services consultant once was asked by the Hualapai Tribe to help in planning a youth detention center. The community was experiencing problems with juvenile delinquency, youth vandalism and alcohol use. The consultant asked questions about recent changes in the community. It turned out that the community recently had built a number of new homes which included indoor plumbing and heating. It also turned out that before the new homes were built, young Hualapai people were expected to chop wood for heating and haul water for cooking and cleaning. The construction of the new homes eliminated an important social and economic role for the young people, who found themselves with a lot of free time and no constructive physical outlets for their energies. The consultant helped the community to view the problem in alternative ways and the result was a recreation program instead of a juvenile detention center. [21]

5. Community Participation

Make certain to include levels of community participation in the design and on-going evaluation of a child welfare program. Community participation can be both formal and informal.

Formal community participation requires approval by the tribal council for the establishment and operation of any program located on tribal lands, particularly those utilizing tribal funds or other resources. For further discussion on tribal organizational structure and management, the reader is referred to Chapter 5, "Management."

- Tribal Council approval for the establishment of a program provides the authority to submit a proposal for funding, and legitimacy for its actions.
- Most tribal councils have committees which review and discuss matters in detail prior to formal tribal council consideration. These include human services committees.

Generally, it is wise to establish working relationships with the community participation forums that exist in the community. The members of various advisory boards often represent the leadership in a community. However, one always should be aware of the leadership behind the leadership which, in tribal communities, is likely to take the form of

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[21] Interview with Ruth Houghton, November, 1990.

family relationships including clan relationships, religious and spiritual leaders and generally respected members of the community such as veterans. Other forms of community participation include:

- Head Start advisory councils. These councils should be consulted when planning programs that affect preschool children.
- School boards. Consider that schools receiving Johnson-O'Malley or Indian Education Act funds are required to have parent advisory committees.
- Elderly Program Advisory Committee. Each tribe that receives Older Americans Act funds and operates a senior citizens center or an elderly nutrition program usually has an advisory committee. The elderly members of an Indian community are often valuable sources of information regarding the history of the community, traditions and values regarding the raising of children, and community leadership.

6. Tribal Government Structure

Every tribe, like every state, county or municipal government, has a different organizational structure. The organizational structure includes lines of authority, communications, working relationships and program groupings or separations.

The supervisor should obtain copies of any organizational structure charts. However, the supervisor should keep in mind that organizational structures are always changing, depending upon such variables as funding, staffing, changes in community needs, the personalities of staff, and so on.

7. Sources of Technical Assistance

The sources of technical assistance for tribal child welfare programs in Arizona include:

- *Inter Tribal Council of Arizona, Inc.* ITCA provides tribes with resources in program planning and proposal writing, coordination of programs, resource development and intergovernmental relations. Its Indian Child Protective Services Academy is the professional equivalent of the CPS Academy for the State of Arizona. Its Annual Child and Family Conference is valuable for professional exposure to new ideas and sharing of solutions.
- *Arizona Department of Economic Security, Administration for Children, Youth and Families.* ACYF employs an Indian Child Welfare Specialist who can assist tribes to plan child abuse and neglect prevention and treatment programs. The specialist also assists individual tribes to negotiate intergovernmental agreements for child welfare and child custody proceedings with the State of Arizona. ACYF sets aside part of its annual funding for child abuse prevention and treatment grants for tribal governments, which has been important in the development of child protective service systems on Indian lands in Arizona. In addition, ACYF oversees Social Services Block Grant (Title XX of the Social Security Act) funds that tribes in Arizona use for child welfare services.

- *Bureau of Indian Affairs Phoenix Area office - Social Services Branch.* The BIA and tribal social services program staff provide valuable on-going training to both BIA and tribal social services program staff on the basics of casework. This training is very important because of the relative lack of trained and experienced caseworkers on Indian lands and because of the rapid turnover of social services staff caused by contracting and funding changes in reservations in the past 10 years. BIA social services staff also can assist with contract administration, including preparation of financial reports and the very important quarterly analysis of grant funds.

B. RESOURCE DEVELOPMENT AND PROGRAM FUNDING

There is no one source of funds to meet all the child welfare service needs on Indian lands. Tribal governments must piece together funds from various sources in order to provide comprehensive services. The source of funding for child welfare casework services are described below.

1. Self-Determination Act Contracts

The basic source of funding for the tribal government social services programs is the Bureau of Indian Affairs (BIA) Social Services Program. The BIA provides funding for social services staff and for welfare assistance grants. (The BIA also provides Indian Child Welfare Act grants, but these are discussed separately below.)

Tribal governments can contract with the Secretary of the Interior to operate social services, under the provisions of the Indian Self-Determination Act.[22]

The funds available to the tribe will be the tribe's share of funds at the BIA Agency. In a single-tribe agency, that amount will be the entire agency social services budget. In a multi-tribe agency, the amount will be a proportional share of the funds available from the Agency.

There are two general "pots" of money available from the BIA:

- Social Services "Administration" funds support the social services staff and program operating expenses (office space, supplies, travel).
- Welfare Assistance grants support General Assistance payments to individuals and payments for institutional care of children and adults. This also provides burial and emergency assistance.

Planning the process to contract with the BIA to operate a social services program requires the following documentation:

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[22] The Indian Self-Determination and Education Assistance Act, Public Law 93-638, as amended by Public Law 100-472. See United States Congress, Senate Select Committee on Indian Affairs, Indian Self-Determination and Education Assistance Act Amendments of 1987, Senate Report 100-274, for the legislative history of Public Law 100-472 and a discussion of tribal....human services and Self-Determination Act contracting.

- The annual Agency budget, usually called the "Indian Priority System" or "IPS" document. This will provide approximate figures for the amount of dollars spent at the Agency for social services.
- Annual analysis of General Assistance funds for the most recently completed fiscal year. This report will provide quarterly and annual data on caseloads and expenditures for general assistance which includes "general assistance" payments (GA, Tribal Work Experience Program, Institutional Care), Child Welfare Assistance (foster care, residential care and special needs), Miscellaneous Assistance (burial and emergency) and "Service only" cases.

2. Contract Support Funds (Indirect Costs)

In addition to the social services administrative and welfare assistance grants, the third source of funds for program operation is called "contract support funds." BIA contract support funds are used to fund tribal indirect costs associated with contracts under the Self-Determination Act.[23]

Indirect costs pay for such essentials as the tribal finance system, the maintenance and repair of tribal buildings, the annual single agency audit, some tribal council costs, utilities, tribal vehicles and liability insurance. The specific items which are included in the tribe's indirect cost pool depend upon the organizational and financial structure of the tribal government. For details, the supervisor should consult the tribe's indirect cost proposal, negotiated with the Federal cognizant agency, and the letter from the cognizant agency finalizing the rate. For almost all tribal governments, the cognizant agency is the Inspector General of the Department of the Interior.

Others who can provide advocacy, knowledge and assistance are the tribal finance director and the office of the tribal chairman. The chairman's participation will ensure that the BIA allocates money from the contract support fund to pay to the tribe the indirect costs associated with the social services contract.

3. Tribal Resources

Tribal governments almost always contribute to the financing and support of children's services. Tribes that received royalty revenues in the 1950's and 1960's often established scholarship funds to assist tribal members to attend school. In the 1960's under the Office of Economic Opportunity Act, the priorities of tribal Community Action Programs included Head Start, Neighborhood Youth Corps and summer youth employment programs. Tribal governments also almost always supplement federally funded programs. There are roughly three categories of tribal revenue. Those in which:

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[23] Affiliated Tribes of Northwest Indians, *Indirect Costs*, 1987; United States Congress, Senate Select Committee on Indian Affairs, *Indian Self-Determination and Education Assistance Act Amendments of 1987*, Senate Report 10-274; and United States Department of the Interior, *FY 1989 Report to Congress: Direct and Indirect Costs Associated with Contracting and as Required by P.L. 100-472, Section 106 (c)*, May 15, 1990.

- Tribes have no independent sources of revenue except Federal contracts and grants. About half of the 300 tribal governments in the lower 48 states, including almost all small tribes (population less than 200) are in this category.
- Tribes have modest annual revenue from tribal trust funds or from tribal enterprises. Roughly half of the tribal governments in the lower 48 states are in this category.
- Tribes have relatively large annual revenues from large trust funds or from major enterprises such as coal mining or oil and gas extraction. Less than 50 tribal governments in the United States are in this category. [24]

Tribes that do have some sources of independent revenue almost always use these resources to benefit elderly tribal members and children. For example, the tribe may build senior citizens' centers for the elderly and basketball courts for the children.

There is no such thing as "free Federal funding." There is always a cost attached. Tribal Costs include:

- The costs associated with planning programs and negotiating contracts.
- Indirect costs that are not fully funded because of Federal funding shortfalls or legislative restrictions on administrative costs.
- Federal program requirements of local cash or in-kind "matching" funds as a condition of eligibility.
- Other costs of Federal programs, since few provide sufficient funds for all program costs.
- Lines of credit. Congress rarely has enacted the annual appropriations bills to meet the beginning of the Federal fiscal year (October 1) in a timely manner. Tribes which are heavily dependent upon Federal funds often must borrow in order to meet the beginning of the fiscal year costs. [25] The Federal government does not reimburse tribes for the interest charges on the line of credit. The Indian Self-Determination Act Amendments (Public Law 100-472) call for the contract year to be shifted to the calendar year in order to avoid the cash flow crunch in the first quarter of the Federal fiscal year.

4. Indian Child Welfare Act Grants

The Indian Child Welfare Act of 1978 primarily addresses child custody proceedings. The Act probably should have been called "The Indian Family Protection Act," since it deals mostly with procedures for avoiding the removal of Indian children from home and tribal

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[24] United States Department of the Interior, *Report of the Task Force on Economic Development*, 198-; and United States Department of the Interior, Bureau of Indian Affairs, *Annual Report on Indian Trust Funds*, 1990.

[25] Michael Hughes, "The Tribal Costs of Federal Funding," Report to the Washoe Tribal Council, 1985, unpublished.

jurisdiction. Except insofar as the Act prevents the unwarranted removal of Indian children from their homes, it does not, and was not intended to, address the need for comprehensive child welfare services in Indian lands.

Title II of the Act authorizes grants to tribes to establish and operate programs to "prevent the breakup of Indian families and, in particular, to insure that the permanent removal of an Indian child from the custody of his parent or Indian custodian shall be a last resort."

Section 201 (a) of the Indian Child Welfare Act states:

> The Secretary of the Interior is authorized to make grants to Indian tribes and organizations in the establishment and operation of Indian child and family service programs on or near reservations and in the preparation and implementation of child welfare codes. The objective of every Indian child and family service program shall be to prevent the breakup of Indian families and, in particular, to insure that the permanent removal of an Indian child from the custody of his parent or Indian custodian shall be a last resort.
>
> Such child and family services may include, but are not limited to:
>
> (1) a system for licensing or otherwise regulating Indian foster and adoptive homes;
>
> (2) the operation and maintenance of facilities for the counseling and treatment of Indian families and for the temporary custody of Indian children;
>
> (3) family assistance, including homemaker and home counselors, day care; after school care, and employment, recreational activities and respite care
>
> (4) home improvement programs;
>
> (5) the employment of professional and other trained personnel to assist the tribal court in the disposition of domestic relations and child welfare matters;
>
> (6) education and training of Indians, including tribal court judges and staff, in skills relating to child and family assistance and service programs; a subsidy program under which Indian adoptive children may be provided support comparable to that for which they would be eligible as foster children, taking into account the appropriate state standards of support for maintenance and medical needs; and
>
> (7) guidance, legal representation and advice to Indian families involved in tribal, state or federal child custody proceedings.

Grants authorized by the provisions of the Indian Child Welfare Act are an important source of funding for tribal child welfare programs but tribes should be aware that the BIA treats ICWA grant funds as time-limited. The lack of adequate funds in social services contracts forced many tribes to finance on-going child welfare services with ICWA grant funds. Then, several years into the program, because of increased numbers of applications, shifts in funding, and allocations from one BIA area office to another area office, the tribes lost their funding. Some BIA Area Offices have implemented three-year grants in an attempt to alleviate the problem of uncertain year-to-year funding.

Tribes that plan to apply for ICWA grants should obtain from their area office copies of the guidelines which list the factors used to rank the applications. Tribes should request assistance from the Area Social Services staff. For example, a tribe may submit a draft of the application to the staff **several weeks** in advance of the application deadline in order to receive comments and suggestions for strengthening the application.

If a tribe receives a ranking score that would qualify it to receive a grant, but is denied because of lack of funds, the tribe always should file immediately an appeal with the BIA.

5. Social Security Act - Title IV

The Social Security Act is the nation's primary framework for Federal financing of human services.[26] Title IV of the Social Security Act includes the following programs:

- Aid to Families with Dependent Children (AFDC)
- Child Welfare Services
- Job Opportunities and Basic Skills (JOBS)

The AFDC program is financed by a combination of federal and state funds and is administered by states. In Arizona, the Department of Economic Security administers the AFDC program through its Family Assistance Administration. In some states, human services are administered by the counties.

Indian reservation residents are eligible, on the same basis as all other residents of the state, to apply for AFDC benefits. Indian AFDC recipients are "case managed" by state or county caseworkers. [27] Therefore, tribal social services caseworkers should build positive working relationships with state or county caseworkers. AFDC recipients are, in most states, eligible for Food Stamps. On Indian lands, tribes often administer commodity foods programs. Therefore, AFDC recipients may want to obtain commodity foods as an alternative to Food Stamps, particularly on Indian lands that are rural and very remote from grocery stores. AFDC recipients also are categorically eligible for Medicaid benefits, and should be assisted to apply to the state Medicaid agency. AFDC and Food Stamp benefits can be very helpful to a family with children that has fallen on hard times economically.

The Family Support Act of 1988 requires certain AFDC recipients to participate in JOBS training programs. The Act authorized tribal governments to apply directly to the Federal Family Support Administration for funds to administer JOBS programs on Indian lands. The Act requires child care services for JOBS participants both during the period of training and up to one year after leaving the AFDC program. Therefore, supervisors who work with tribes that administer JOBS programs should look into the child care provisions.

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[26] United States Congress, House of Representatives, Committee on Ways and Means, *Compilation of Social Security Act Laws*, Ways and Means Working Committee Print, 198-.

[27] Interview with Ms. LaVerne Yazzie, Reservation Unit Manager, Family Assistance Administration, Arizona Department of Economic Security, 1988.

The Secretary of Health and Human Services is authorized to make grants to tribal governments under Title IV-B of the Social Security Act.

6. Social Security Act - Title XX

Title XX of the Social Security Act provides Social Services Block Grants for states to enable them to provide a broad range of social services designed to assist families to become economically self-sufficient. Title XX services are based upon state priorities. One of the attractions of Title XX funding for states is its flexibility and its broad range of allowable activities.

The Social Security Act does not authorize the Federal government to provide Title XX funds directly to tribal governments. However, Indian reservation populations are included in the state population figures that are used to allocate Title XX dollars. In addition, Indian reservation populations have many of the needs that Title XX funding is intended to address. In Arizona, the Department of Economic Security and the Inter Tribal Council of Arizona have designed a system for the State of Arizona to pass-through to tribal governments a portion of the state's allocation of Title XX dollars. The tribes use the Title XX dollars to supplement either children's services or else services for the elderly. The tribal system is more fully discussed in the section entitled "Orientation to Tribal Government."

7. State Funds

States appropriate money to support human services. Most state appropriations for human services are dollars that are required for state matching funds. For example, the Social Security Act requires states to provide a percentage of the funds in order to receive Federal matching funds for the AFDC and Medicaid programs.

However, states sometimes fund certain programs such as child abuse and neglect prevention and treatment grants. Tribal governments should work with their state welfare agencies to determine what funds are available and to develop a system for providing a share of the funds for tribal programs.

8. Other resources

Other sources of funding for child welfare services include the Save the Children Federation and United Way.

C. PROGRAM MANAGEMENT

Once a supervisor has obtained funding for a child welfare program, the next task is to ensure that the funding is spent properly, and that the required paperwork is submitted on time to the funding agency.

1. Contract and grant management

Every funding agency has its own contract and grant management requirements. Even different Federal agencies operate their contract and grant management systems differently. Therefore, the supervisor should become familiar with the contract and grant management protocols of the funding sources. An expanded discussion is offered in this manual in Chapter 4.

For BIA self-determination social services contracts, the contract requirements in-

include quarterly and annual program and financial statements, the "SF 272s." In addition, because these are welfare grant dollars, it is important to keep close tabs on General Assistance expenditures and to work closely with the contracting officer's representatives to ensure proper accounting and flow of funds.

2. Finance

One of the most critical matters of administrative supervision is to develop a good working relationship with the tribal finance office. This takes time and effort. Social workers often do not understand accounting and accountants more often do not understand social work.

The supervisor will need to understand the basic requirements of the accounting office: payroll documentation, procurement procedures and authorizations for expenditures. The supervisor will need to ensure that the accounting office has a basic understanding of General Assistance payments to individuals and Child Welfare Assistance payments to providers of out-of-home care. In addition, the supervisor and the accounting office both will need to understand the reporting requirements of the funding agency.

For several years the author was a planner for the Washoe Tribe in Nevada. Early in his work for the Tribe, various program managers, including the social worker, the clinic director and the law enforcement captain, asked the author to write funding proposals for the renewal of their self-determination contracts with the BIA and IHS. After each request, the author said that he would not write their proposals for them. Each of the program managers said, "But you're the planner." And he replied, "That's true, but you know your program better than anyone else, and I don't." Instead, the author offered to help them write their own proposals. A key part of the planning was the budget. In their first attempts to plan their budgets, every line item in the budget had three zeros at the end, $5,000 or $2,000, with little or no justification. The author assisted each of the program managers carefully to plan each line item in the budget based upon studied projections of cost. At the end, each program manager had a very carefully planned budget with detailed justification for each line item. The result was that the following year, the managers were better able to control their budgets because they had a detailed understanding of what was included in the budgets. Also, because of careful cost planning, the previous problem of large overexpenditures or underexpenditures in various line items was eliminated.

3. Personnel

The supervisor should be familiar with the tribe's personnel system. This includes procedures not only for hiring and firing personnel, but also for health and life insurance, leave and retirement. Increasingly, employment is being defined by the courts as a form of "property right" and employers are finding it more difficult to defend arbitrary or poorly documented personnel actions.

4. Tribal Head

The tribal chairperson, or head, whatever the title may be, needs to be kept informed of both program performance and of matters that might need attention. The structure of

the tribal government will determine the procedures for providing reports on program performance to the head person.

In social service programs, there are sometimes matters over which the client is dissatisfied with the service or the benefit determination. There always should be clear procedures for appealing caseworker decisions, to the supervisor, to the department director and, ultimately, to the tribal head person.

5. Tribal Council

The tribal council is responsible for authorizing the establishment of programs operated by the tribal government, for providing resources for the operation of the programs and for ensuring the program continues to address the purposes or goals for which it was established. Tribal councils need not be involved in the daily operation of the tribe's social services program; they do need to know whether the program is providing services consistent with tribal council policy and whether it is achieving the goals adopted by the tribal council.

The supervisor should have a clear understanding of the procedures for making program reports to the tribal council. The program reports should be brief, and the point clear on whether or not the program is achieving its goals.

Finally, the supervisor always should remember that tribal council members are elected officials and they have a responsibility to their constituents. Tribal council members will hear from their constituents if there are complaints about social services. The supervisor should be willing to listen to complaints and indicate his or her willingness to investigate and report back to the council, through the tribal head person.

D. SERVICE COORDINATION

Important elements of effective child welfare casework are good working relationships with all of the programs in the child welfare system. The Community Resource Inventory described above will provide basic information about all of the programs and the resources included in the child welfare system

Even if the supervisor has no opportunity to conduct a formal inventory, it is important, at least, to conduct an informal inventory.

The various programs involved in child welfare services may not view themselves as parts of a system. One of the tasks of service coordination is to get the pieces working together.

E. SUMMARY[29]

In presenting this chapter on the comprehensive child welfare system, the author has been severely tested by the need to reconcile the magnitude of the thesis with the practical reality of limitations on time and space. The coordinator's principal measure, given these circumscriptions, reflects the dedicated aim of soliciting and providing as much as possible of the specialized knowledge for which the author has gained noteworthy standing in the Indian community.

Indian child welfare as an institution is just beginning in the past decade to take its place in the service delivery systems of tribal governments as they have taken the initial steps to move towards full functioning as independent entities. The author has described the process with attention to the needs of the intended audience of supervisors and teachers of supervisors, delineating the most important factors making an impact on the development of child welfare systems: the enactments of the Indian Self-determination/Education Assistance and the Indian Child Welfare Acts. In a basic orientation to tribal governments are defined these legislative actions as they presently affect (1) conduct of tribal governance, (2) welfare work in the Indian community, (3) tribal community development, (4) program initiatives and development of resources useful in promoting self reliance, and (5) attitudes toward American Indians' historic relationships with myriad Federal government agencies; he explains how these relationships have shaped and dominated Indian life, in general. Understanding the history and its influence on Indian life and culture remains the most difficult challenge for supervisors successfully to meet.

He has incorporated into the chapter the basic review of "Casework Supervision," contributed by Ms. Ruth Houghton, whose considerable experience working with Indian families in the rural, as well as urban, setting provides another source of expertise and specialization for work with Indian families and children. Additionally, the writer includes in this section a discussion on child custody issues and placement of children away from the home.

Finally, in the section on "Administrative Supervision," the writer outlines a comprehensive inventory on elements and information required for program planning, the development of resources for program funding and program management. The outline is a practical tool for administrators in Indian country.

It is important to repeat that the authors of this manual hope that supervisors of Indian child welfare workers will find this manual useful as a practical reference for working with tribal governments and Indian communities in planning and managing child welfare programs and in supervising casewokers.

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[29][Editor's note.]

APPENDIX A

DEVELOPING CHILD WELFARE STANDARDS

(Note: One task of a tribal child welfare agency is to ensure that the tribal government has a child welfare code and standards for out-of-home care. If the tribe does not have a code and standards, then the agency should seek documents from other tribes and the state government. These documents can serve as guides, only. Codification of standards ideally should reflect that tribe's philosophy about children.)

I. Tribal Child Welfare Code
The tribal child welfare code should include:
A. Child Custody Procedures
B. Guardianship Arrangements with Relatives

II. Tribal Child Welfare Standards
The tribal child welfare standards should include:
A. Foster Care Recruitment, Licensing and Evaluation
B. Group Home Licensing and Oversite
C. Adoption Recruitment

APPENDIX B

Sample Questions for a Community Resource Survey

1. What services does your program provide?

2. Whom do you serve or what is your service population?

3. Does your program have specific eligibility criteria?

   ..... Age limits

   ..... Income levels

   ..... Geographic criteria

4. If we (child welfare programs) make a referral to your program, to whom do we make the referral?

5. What is the staffing of your program?

6. What are your priorities regarding the child welfare needs in this community?

7. How can our program best address those needs?

8. Do you have any other comments that you would like to make?

APPENDIX C

HOW TO MAKE A REFERRAL

The following basic steps were developed by Ms. Ruth Houghton, to train caseworkers in making services referrals. (Unpublished, used by permission)

1. Interview the person requesting service.

2. Decide with your cilent what service he or she really needs.

3. Select the agency you believe is the most appropriate one to provide the service.

4. Telephone the agency to make sure that:
   a. It can provide the service needed.
   b. Your client is eligible for the service.
   c. The receiving agency has time available to perform the service for your client.

5. Inform the receiving agency that you will be referring your client for service; make an appointment for your client with the receiving agency.

6. Make sure that your client will have transportation and that he/she understands the arrangements made; give your client a memo with the agency location, the date and time of appointment and the name of the person he is to ask for at the receiving agency.

7. Write a referral form or letter to the receiving agency clearly stating necessary identifying information about your client and a listing of the services for which your client is being referred.

8. Give the referral letter to your client to take to the receiving agency.

9. If your client is incapacitated, inarticulate or unable to speak English, send an aide or volunteer to accompany him or her to the appointment, or take your client yourself.

10. After the receiving agency should have given the service, follow up with the agency to be sure that the service was performed; then, confirm with your client that he or she indeed received the service.

CHAPTER 2

FAMILY PRACTICE
IN THE NATIVE AMERICAN COMMUNITY

WELCOME TO HOPI
"You drive down this road half mile to the second dirt road; just past the standpipe until you reach the mustard colored house near the brown and white trailer..."

Prepared by:

Anne Szulgit, MSW
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INTRODUCTION

When I was approached to write a chapter on supervision and family practice in a Native American community, I was excited. I believed that there was a shortage of practical information available to students who had expressed an interest in working cross culturally. I had been writing and rewriting the chapter about three months when I discovered some interpersonal doubts; I was reluctant to share what I considered pieces of my practice theories and experiences. I also doubted that I like exposing to criticism so much of my personal self. I had started in this field as a family practitioner from which I was promoted to a supervisory position. I know, or maybe only thought, some of my insights were reflective of experiences of other individuals who had worked in Native American community settings.

I have worked hard on understanding my role and the unique life patterns in the Native American community. But suddenly I wondered: What if I really haven't learned anything that was based on a true understanding of the frames of reference held by Native American individuals about working in a Native American community? All my anxiety surfaced one day when one of my co-workers, a member of my staff, asked if he could read what I had been working on for so long. His name is Jabby. He fits several of the prevailing stereotypes perceived about Native Americans. He has a large, imposing physical appearance and long dark hair. He has a tendency to: believe in male dominance, be a bit suspicious of the Anglo individual and he is very proud of his ethnicity. He is typical of many of the community members in that he works hard in his position as a tribal employee; he values family life and the predictability of the daily and seasonal patterns characteristic of reservation community life.

Jabby is also my harshest critic. He has the ability to present mutually recognized issues from the Indian perspective, often with different outcomes. We have struggled to understand each other and accept the weaknesses of the other. He left my office with three months of my time and thoughts in his hands; he came back saying this is "pretty good; I think all White people should read this."

I was happy and now felt confident that I had learned some things that I can share with other non-Indian people about working in this Native American community.

FAMILY PRACTICE IN THE NATIVE AMERICAN COMMUNITY

A family practice worker who chooses to work in an Indian community must be prepared for cultural immersion and willing to accept, or at the least, respect new norms and life patterns. The nature of a community established by, and entrusted to, the protection of the federal government is different. It is different, geographically and socially, from a neighborhood in the general public community. The most significant difference is that the complete history of an individual family can be found in one geographic area. This characteristic is unique to "the reservation," the common term used by most residents of these communities. Community youth visit and participate in the same institutions as their ancestors did. Family members are interconnected by shared land and relationships extending to the whole community.

The population density on a reservation is much less than it would be in a typical urban or suburban neighborhood. The infrastructure of a reservation community is less complex than that of a non-reservation community. Family practitioners should anticipate substantial differences in lifestyles and landscapes in a reservation community.

> One of the earliest cases to which I was assigned as a family practice worker exposed me to some of these differences in lifestyles. I was instructed to go on a home visit to find out why two children had not been attending school. On the intake sheet the address was listed only as a rural route number. However, one of my co-workers informed me that the house was "mustard colored and located on the second dirt road past the standpipe near the brown and white trailer." Locating the client's home was just the beginning of a different reality. I was greeted at the door by several dogs and an elderly man who invited me into the living room. Immediately, all my sensory faculties were working in an effort to comprehend the household. There was a middle aged man sitting on the couch surrounded by disarrayed clothing, papers and dishes. The kitchen was only partially visible, but I could see dishes on the stove, the floor was unswept and the smell of some type of heavy grease permeated these two rooms. The man on the couch did not greet me, but the elderly man suggested I sit down. My mental response to this suggestion was, "Where?" Dozens of why questions flooded my mind and I realized at this point in time that some of my middle class perceptions would have to be discarded and that I was going to have to learn about this part of one Native American lifestyle before I could suggest case plans and interventions.

Household compositions change as a matter of course, depending on changing relationships or financial circumstances for any member of the extended family. A family practice worker has to be willing to look for clients' homes by relying on landmarks such as trees and standpipes or by asking community members further directions when informed of changing living situations of particular clients. A family practice worker must be willing to accept alternative housing arrangements and unpaved roads that lead to scattered homes in seemingly unplanned neighborhoods. If a family practice worker is appalled by clutter, or expects that each family member will have his own room in his home, the

reservation setting may not be appropriate for him/her to consider. The number of family members living in one house often requires that people sleep on the floor or in the living room on the couch. Family space is shared and an individual's space may be determined by his/her status, related to age and gender, in the family.

Food preferences, food preparation and an awareness of nutrition all reflect the traditional norms of the tribal community wherever that community may be located. The place that food enjoys in the life of the community is related to the community concept of family. Food is, additionally, a natural, traditional therapeutic tool for the community. Family gatherings literally feed family members both physically and psychologically. This community practice is significant to societal personality development.

Sexually liberated family service practitioners may be baffled by women's roles in the community. Women's total acceptance of familial roles may be at the expense of their own independent development. Male community members rely on women for sustenance in food preparation, spiritual leadership, child rearing and daily personal care in the home. Sex based equality of status is not an issue because the family identity takes precedence over the identity of the individual.

The importance of family as a community value is reflective of the matriarchal structure of many Native American communities. Initially, to a non-Indian family practice worker, it may appear that the community men have the authority. Community males generally have the formal authority in their roles as tribal department managers or political leaders. Community women, however, have the informal power to influence the policy decisions that are made. The women of the community collectively influence the daily life pattern of the community and it is on these patterns that policy decisions are based.

The importance of generative continuity supersedes family planning practices. Women, including the young, accept their role as childbearers and gain status by having children. Who by, and how, these children will be cared for is not intellectually processed as might reasonably be expected in the dominant culture. The individual takes assurance in her belief that the extended family will provide support, if needed. The reluctance toward family planning as an institution can be frustrating to a non-Indian family practice worker. The underlying cause for this frustration may be motivated by the practitioner's sense of values about financial success, a sensibility that doubts whether this family will ever "get ahead" economically.

The constitution of the extended family is rarely static because of the high number of births characteristic of this group. This makes it difficult to implement treatment intervention, relative to the community as a whole.

These are illustrations which serve as a sample of the different life views and behaviors that may be found in a reservation setting. If an individual family practice worker enjoys open spaces and the opportunity to observe changing seasons through the changes in the land, then the reservation may be ideal. If an individual family practitioner has qualities of patience and the ability to laugh at self, or to use "self" as a therapeutic tool, then the reservation setting may be ideal. Only when a family practice worker demonstrates

willingness to accept the Native American community as an entity with its own values and political structures will he or she be accepted. The most important tool that a non-Indian worker must possess is the ability to accept the validity of a different life pattern and to be able to adjust his/her practice methods to respond to that unique life pattern. A family practice experience in a reservation community can be productive and enriching if the individual is able to let go of learned expectations reflective of the dominant culture and to respect the existence of alternative lifeways in an Indian community. Each non-Indian family practice worker will have a unique experience, depending on his/her ability to see through different "colored glasses."

Supervision in a Cross Cultural Setting

Supervision in a reservation community setting requires that the supervisor maintain an awareness of the (1) community values, (2) community political structure and (3) informal political structure which is linked to the family systems in the community. Supervisors have to maintain an awareness of these factors from two perspectives which are: their own role in the scheme of things and the relationship of these factors to those they supervise. Another factor that influences the relationship of supervisors and their employees (supervisees) is the operation of the dual perspective in family practice.

The dual perspective can be defined, informally, as "having one foot in two worlds" or functioning within the norms and rules of the dominating culture while maintaining one's own norms and rules. How does this duality of perspective influence the relationship between the supervisor and supervisee in the Native American community? One possibility will be explored.

While it must be considered by the supervisor who supervises the Native American employee working and living outside the natural milieu, the dual perspective, to a more intense degree, has a unique significance for a supervisor who works in the Native American community in the reservation setting. The primary differences when applying this concept to the case of the Native American employee working within his/her community are (1) the percentage of time the employee is immersed in activity identified with, and (2) the level of his/her personal integration of, the cultural values of the dominant culture and, (3) the impact of the local community's perception of that employee in his/her job niche.

Influence of Community Values on Supervision

One role of a supervisor is to create a workaday structure for the supervisee. This structure will include agency (or department) policies and procedures. If the supervisor fails to build these policies on the community values, the effectiveness of the policies may be undermined from the time of initiation. This is true also of the establishment of strategies for program implementation. If a department head creates program strategies that are not supported by the existing values of the community, the program's effectiveness will

be diminished or the strategies counterproductive on several levels of employee and community support. The cultural values which have the greatest influence in the daily work place are (1) the concept of time, (2) team or group consensus rather than individuation, (3) cooperation rather than competition, (4) listening and observing rather than verbalizing and reacting, and (5) interdependent rather than independent action.

The Concept of Time

The concept of time in a Native American setting is different from that in the larger society. Supervisors who create policies for "docking" or penalizing staff for tardiness may find themselves processing disciplinary actions with no results. Time as a relative concept is connected to other variables in the community. These variables are different from those found in western society. One employee may be consistently tardy because he/she is dependent on an extended family member for transportation; that family member may be responsible as well for taking another family member to work. Should any part of this chain of interdependence break, as in the case of a family member who is habitually disorganized, an employee may experience the domino effect, over which he may have little control, as a result of the break.

Following is an illustration of the difference in the concept of time in Native American communities. One's time is shared. The perception of the dominant culture is "my time," while significant numbers of Native American employees tend to view time from a frame of reference in which time is an integral part of the cumulative share used by the extended family. As a supervisor, I am not advocating that time management strategies be dispensed, but I do believe that when evaluating employee use of time, his/her overall productivity in the department has to be considered, as a practical accommodation for serving conflicting value systems.

American culture has begun to recognize the importance of defining flex time and incorporating it into organizational management policies. The Native American community traditionally has practiced this concept of time. Unfortunately, the community has been negligent in clearly stating how it is used in tribal policies.

For the supervisor, it is necessary to create a balance between the two, on the one hand, the traditional time management strategies used in public administration and, on the other hand, the Native American concept of time in the workplace. This will allow the employee to experience some autonomy with his daily life patterns in the local community.

Influence of Time on Family Practice in a Reservation Setting

Supervisors need to provide family practice workers with a clear perspective of how the concept "time" may affect their treatment strategies and for non-Indian employees, whether and how it may influence their relationships with professional Native American co-workers. If a non-Indian employee is not aware of the departmental policy on flex time, he/she may become frustrated with the co-worker who suggests they have a family session in the evening because of the increased accessibility to families in the community.

Staffings on individual cases in a multidisciplinary setting also may prove to be sources of frustration for the employee who wants to discuss treatment issues in a rigid form such an agenda.

Often staffings or planning meetings start with an informal discussion and recognition of co-workers whom perhaps other staff have not seen for awhile.

These informal discussions and the conscious recognition of that co-worker can reinforce or validate the family practice worker's job performance. Because of the community value placed on group consensus, a Native American employee tends to look for validation from co-workers in contrast to the Anglo community in which employees tend to look for validation from their supervisors. A supervisor who refuses to allow staff to have planning meetings or staffings will decrease, probably unknowingly, the level of production and creativity in her/his own department. The use of informal time by a family practitioner may prove invaluable in a later case when the practitioner needs to arrange for the client the support of another co-worker from another department. The employee who is always on task with the agenda also may miss the opportunity to form strong, informal political alliances that will be helpful on key issues regarding policy or responsibility.

The concepts of networking and coordination are terms that administrators use to rationalize organizational structure. These concepts are used consistently at the practical level in Native American communities. An example is the multidisciplinary staffing on an adolescent who is being considered for placement:

> Steve is a 14-year-old male who resides with his maternal aunt, the aunt's common-law husband and their two children ages 8 and 6. Steve has resided in this home since he was 9 years old. He was placed there by the tribal court because of his mother's negligence. His mother has made no effort to regain legal custody because she always has been able to spend time with him. Steve's living pattern over the last five years has been to stay at his aunt's home during the school week and his mother's on the weekend. For the past eight months, Steve has developed a pattern of not coming back to his aunt's house until Monday afternoon. This pattern has concerned his aunt because of the alcohol abuse in his mother's home. She has had some suspicion that Steve is using alcohol because his attitude and physical appearance have changed. He is reluctant to attend school, frequently acts tired, yells more at his cousins and is more defiant of the house rules. Steve's mother is being monitored by a family practice worker because she left her 4-year-old daughter for a week with a relative without informing the relative of her whereabouts. This past weekend Steve was detained by the tribal police department for breaking into a community member's home and for public intoxication. The aunt came to Social Services on Monday and announced that she is relinquishing custody of Steve because of the negative influence he is having on her children, the common-law husband's anger at the situation, and her own lack of control. Steve was arraigned and has to appear before tribal juvenile court in two weeks.

This case may be used in the classroom as a study illustration for which the following questions may be posed as learning objectives:

1) Define the immediate presenting problem and possible solutions.
2) Outline what your short and long term intervention stratigies would be, and explain why.
3) Whom would you include as participants in a tribal multidisciplinary staffing?

Group Consensus Versus Individuation

Employees in a Native American community seem to transfer the concept of shared extended family values into the workplace. Employees tend to operate from a premise of group consensus of opinion instead of an individual opinion. This can be a strength in a family practice setting because greater participation is offered when developing case strategies. This increases the number of creative alternatives for intervention. Several examples of tasks that can be shared in a community family practice setting are: (1) therapeutic interventions, (2) case recording, (3) referral to other resources, (4) case planning and (5) aftercare monitoring. (See also Chapter 6, "Supervision," p. 6.6)

The weakness of this approach is that the workers may rely too heavily on the work of other staff members for treatment direction. The informal reliance on the "group" (defined as departmental co-workers) to perform case management tasks is a consequence of the integration of the community value of group consensus. This practice decreases the level of accountability for each staff member and makes difficult the evaluation of individual work performance. This can cause time delays in service delivery.

The role of the supervisor is to work with each service provider on developing her/his own assessment tools and provide consistency through developing a policy that outlines the proper place and time for multidisciplinary or departmental case staffing. If cases are shared, it is important that the supervisor define the roles and responsibilities of each staff member. Failure to do so may create situations in which service providers spend more time in case staffings than in delivering service.

Another area in which the acceptance of group consensus inhibits change is personal staff development. As a supervisor, I have experienced resistance by Native American employees to assume leadership or supervisory positions; I believe this is because they perceive themselves as a group, reluctant to assert themselves in leadership. This invisible group extends beyond co-workers to the whole community. In this context, taking a lead role would require individual "risk taking" and accountability not only to the department, but to the community political structure. It is important that the non-Indian supervisor recognizes that this larger group pressure exists. The supervisor should allow the employee the discretion to deal with the issue and avoid placing pressure if that person chooses to subordinate his/her own identity to that of the group, despite apparent potential, because of the risk that exposure may bring. Often these individuals will recognize, on their own, their potential for self-development and it is the perceptive supervisor who will be prepared to apply the supportive and mentoring skills which mark the beginning of leadership development.

Cooperation Instead of Competition

One of the most significant life view differences a family practitioner faces in a Native American community is that of cooperative instead of competitive relationships among family members. The level of cooperation in a Native American family will determine the level of success a family practitioner experiences with any intervention. The level of cooperation within a family can enhance or destroy an individual's progress.

A classic example of this cites an adolescent who completes a chemical dependency program off the reservation. The adolescent may have experienced sobriety for 45 days while in treatment, but the length of recovery will be influenced by the family's willingness to cooperate and support sobriety or to cooperate and support addiction. Again, it is the supervisor's responsibility to educate the family practice worker about this community practice.

Another example of this would be a referral of suspected sexual abuse of a young female. The family practice worker may, in the investigation, discover that the family has a history spanning generations of sexual abuse of females. Because of the level of dysfunctional cooperation in the family, these offenses have gone unreported. The family practice worker may experience the same level of dysfunctional cooperation with both family systems.

In both case examples, the level of cooperative denial may extend to the community political structure and the informal network. The family practice worker may experience a sense of hopelessness when evaluating his/her ability to have an impact. The supervisor's role is to "hear" the family practice worker's frustration and then try to influence the political structure by implementing policies and programs at an administrative level.

One way a supervisor can increase the power of family practice workers is through written contributions for tribal council reports or federal compliance reports required by funding agencies. This management approach creates a cooperative relationship between supervisor and supervisee through recognition and use of community practice methods. It is important that the supervisor acknowledges employees as integral parts of the decision making process. Departmental policy needs to be formulated out of employee brainstorming, not management directives, in order to be effective. This practice also applies to the relationship between family practice worker and clients. The clients need to have some sense of accountability for their treatment plan.

One of the most difficult tasks for the supervisor is to educate the family practice worker on how to assess the larger relationship of the client to the community and that client's need to balance commitment to treatment in relation to the consequences levied by the community for being "successful" in treatment. "Successful" is in quotes because each community member will have his or her own definition of success based on individual values.

A case example is the adult who successfully maintains sobriety for six months. Prior to becoming sober, this adult enjoyed a privileged status within

the community because of the ability to drink the most beer and overpower anyone who physically threatened him. He can recall being treated with respect when greeted by other community members, including family practice workers and law enforcement staff. People used to invite him to parties, offer him rides, give him money for alcohol, tell stories about his physical prowess even after the party was over. Now that he is "successfully" sober, he finds that he is lonely, no longer talked about by community members and has a hard time meeting all his financial commitments. His status has changed and the consequences have been negligible in terms of his own level of community acceptance. The family practice worker will support the "success" of this client's sobriety, however the consequences levied by the community may encourage the client to relapse. The family practice worker and supervisor have to be sensitive to the possibility that their own perception of "successful" treatment may not mirror the community perceptions.

When a client realizes that the "costs" for change exceed the benefits for change, he may choose to remain cooperative with some unspoken, but understood, dysfunctional community norm. The supervisor and family practice staff have to remove themselves psychologically and intellectually "from the community" to assess and re-commit themselves to the stated program goals.

The supervisor has a responsibility to staff members to allow them to question the system. S/he may assist them in redefining obstacles within the frame of reference of the dual perspective in order to develop effective treatment interventions and program policies.

In the previous case example of a recovered sober adult, the case worker's goal will be to assist the client to maintain sobriety. However, that worker will have to recognize that the number of sober individual and naturally occurring sober support system may be minimal within his circle. When the status of one community member changes (*i.e.*, from an alcoholic to a sober adult, from a juvenile delinquent to an academic achiever) on the reservation, the homeostasis of the whole community is redefined. The pattern of community change is unique to reservations because of their organizational structure.

Family practice workers can capitalize on the concept of cooperation in the extended family if there are no nuclear family members who are willing to cooperate in treatment. This practice can be applied to family situations which present multiple problems. Some examples in which the extended family may cooperate with family practice workers are, (1) sharing resources such as transportation and housing; (2) acting as an advocate for a youth when the parent is unable; (3) acting as a positive influence/role model; (4) enlisting a support person to the family practice worker to get another family member to comply with treatment. It is the responsibility of the family practice worker to utilize creatively this natural network in order to: 1) minimize the client's dependence on the tribal health and human services system, and 2) to strengthen family mental health which has direct impact on community mental health.

Styles of Communication: Observing and Listening

Another challenge a non-Indian family practice worker faces is learning how to accept and utilize the style of communication that is unique to a Native American

community. Non-Indian employees in a reservation setting are immersed in a community communication pattern that reflects the history, cultural practice and attitudes of the community. Each Indian community possesses its own idiosyncrasies and norms which are reflected in both verbal and non-verbal language.

One area in which workers need orientation is in how to approach clients. Native American clients generally are much more reluctant to share personal, even more so, intimate, information even under circumstances which call for this information as a necessary part of the helping response. They may, by their demeanor, demonstrate an extraordinary need for a relationship of trust with the person requesting information. A majority of people in the Anglo culture get some ego satisfaction from sharing information about themselves to a "listening ear" with little consideration given to how that information will be processed by the receiver. Native American clients and employees generally require more time to establish relationships and will share intimate information only where there is a foundation of trust. These different styles of communication are based on how the two cultures define what is intimate information and the level of interconnectedness that exists between individuals in a reservation community. Intimate information for a Native employee or client will include: 1) **family history**, *i.e.*, who are related to him/her, 2) **family beliefs and value base**, and 3) **economics**, *i.e..*, how much money he/she makes, how much land he/she owns. A family practice worker has to develop an ability to work from the same reference points as Native American co-workers or clients in order to be an effective communicator. (cf. Chapter 3, "Management,")

Trust relationships can be established by not insisting that information be revealed and by demonstrating a willingness to listen and to be "there" for the client. Initially, clients may test the worker's genuineness by asking the worker to perform some task, *i.e.*, take them to the clinic, to the store, to assist them in filling out forms, or to find a relative. All these tasks require some interaction between the worker and the client but the level of intimacy is not threatening. This is where the use of self as therapeutic tool becomes critical to the establishment of the client relationship. In simple terms, the worker must be willing to give to the client if s/he wants to take from the client in the form of information gathering. This pattern reflects the Native American value of cooperation or **exchange** contrasted to the pattern of establishing control or dominance.

This approach will require some modification of strategies for assessment and evaluation. The family practice worker will have to review with the client all intake information after a period of time in order to develop a more accurate and complete assessment. This practice is especially critical with adolescent Native Americans who may generalize their mistrust of a specific Anglo employee to all others in the specific group represented by this individual. This behavior is not unique to Native American adolescents and is explained by their collective experience and their parents' experiences which have created, as a defense mechanism, a hesitancy to "become intimate" with Anglo workers.

Humor in conversation is one technique that is frequently utilized by Native American individuals to get more information, to strengthen relationships, or to demonstrate affection.

This style of humor includes making fun of self and not taking the professional self too seriously.

> Billy is a Native American counselor who works successfully with youth because he uses humor effectively. I observed him with a 13-year-old female during a session. The following account describes his style. The 13-year-old was angry about being in his office and made it clear with her non-verbal posture that she was not going to talk. She sat with her head down, hair in front of her face, arms folded, tapping her feet. Billy tried the conventional intake approach of asking questions, but got no response. So he said, "Hey, what's that on your shirt you're looking at?" (The young woman smiled, keeping her head down.) Then he said, "I must be some kind of dumb Indian because I don't see anything, eahhh!" The use of patois made her put her head up and she laughed. Billy then commented that it was good to see her laugh and continued to rattle off some more jokes, poking fun at himself. This approach took the focus off the 13-year-old female and allowed her to relax through laughing with Billy. This approach created a shared experience for the client and therapist to build on. If, however, Billy had used the conventional approach and continued to focus on the client, I believe that the client would have continued to resist.

Clarification of the intended message between co-worker or clients sometimes may be sought in indirect fashion with the use of humor. If a family practice worker has difficulty with indirect messages or using self as a humorous focal point then, I believe, it would be difficult for that person to become integrated into the tribal health and human services system as an effective employee. One component which should be included in the training of all new employees is an orientation to the "use of language" within the community context. Some of this training only can be accomplished by having the employee observe other staff / community members and discussing with the supervisor his/her perceptions.

Non-verbal communication patterns in a reservation setting are unique to that community and, again, reflect its historical experience. Non-Indian employees may observe community members gesturing with their hands or eyes in styles unfamiliar to them. Physical touching is limited and, sometimes, taboo for certain families suffering dysfunctional relationships. This does not mean, however, that fondness for someone is not demonstrated; it is demonstrated differently (as, for instance, by sharing a meal, or giving a gift that requires some personal effort).

A non-verbal pattern with which Native Americans are more comfortable than non-Indians is sharing physical space with another individual but not engaging him/her verbally. I have experienced a sense of uneasiness with clients who want just to sit. I have learned to accept their silence as one way that clients process information and internalize therapeutic suggestions. This silence should not be interpreted out of hand as a lack of interest or comprehension. The non-Indian employee will need to alter his/her understanding of non-verbal patterns to develop a new sensibility based on the community pattern.

The nonverbal communication pattern that has received the most attention in research literature and in school systems is the **indirect eye contact** which is sometimes

described as **no eye contact**. Non-Indian employees need to be aware that most Native people will minimize eye contact but that does not mean that they are 1) not listening, 2) not assertive and 3) lacking in self confidence. Minimal eye contact by a Native American client should not become a cue for judging one for having poor self esteem. It is the responsibility of the non-Indian employee to become aware of the community's patterns of non-verbal communication and to make the effort to develop at least the sensitivity for, if not to adapt his/her communication practice to, the pattern. It is not the responsibility of the client to adapt his/her communication pattern to the norms of the non-Indian social worker in order to make it easier for that direct practitioner to complete an assessment or to develop intervention strategies.

The ability of the non-Indian family practitioner to recognize, appreciate and utilize both the non-verbal and verbal communication patterns within the community will influence his/her effectiveness with clients and workers, and success as an employee in the community.

CONCLUSION

In summary, the two primary skills any family practice worker or supervisor ideally should possess when choosing to work in a Native American community are (1) an understanding of the dual perspective and its application in practice and (2) the ability to perceive the needs of the client without imposing one's own values.

The importance of the dual perspective cannot be overstated. I remember lectures on this concept in college class but I never understood the impact it could have on the individual's ego development until I began working in a Native American community. In our daily practice, we have to remember that each community member has had to create a personal, internalized balance between community cultural norms and those of the dominant culture. This balance has to be strong enough to withstand pressures to conform from both cultures in order for the **individual** self to survive. The balance between these two life patterns changes as the individual develops but the pressure never disappears completely unless the individual isolates him/her self from the dominant culture.

As a family practice worker in the Native American community, you may experience some feelings of internal confusion which arise out of balancing two systems, in this case, the dominant culture and the Native American culture. However, you cannot match, ever, your own level of confusion with that of a community member, because that member lives this duality and pressure daily; s/he has a physical appearance and history that sets her/him apart from the dominant culture.

The second point is that family practice workers come to their place of employment with sets of values that reflect their life experiences and family beliefs. To be an effective practitioner, it is critical that the family practice worker does not base the client's treatment goals on one's personal values. Some common Anglo-Saxon values which have been identified as importations are, employment as a symbol for self-worth, higher education per se, acquisition of material possessions. Family practice staff and supervisors also have to evaluate periodically whether or not they are basing their actions on their present level of need or that of the client or employee.

An individual's supervisory or direct practice experience in the Native American community also will be influenced by these factors: (1) community values, (2) community political structure and (3) the informal political structure. The responsibility for creating a working relationship between the individual employee and these factors lies with the supervisor or family practice worker, not with individual parts of these factors. It is not realistic to believe that the existing systems are wrong and that one can change them by imposing one's own values.

Finally, in reviewing the material presented, I ask myself, is this the information I wish to convey to family practice students and their supervisors about working in a Native American community? Did I discuss thoroughly enough how the individual practitioner must be able to **evaluate self**, as well as the community, in order clearly to understand the human dynamics and personal responses of the clients themselves? Did I describe with feeling the

geographical and cultural differences that make the work in a reservation community personally satisfying? Did I stress the importance of being open to new life patterns and values? Did I talk about the value of patience and the reward of acceptance by the community?

Certainly, I recognize that this chapter has limitations in terms of its scope of discussion on each point from a critical view. My intention is that this material will provide a foundation for family practice students to begin critical analysis of each point through discussion with other practitioners, the better to understand the full implications of choosing to work in Native American communities.

CURRICULUM OUTLINE FOR
FAMILY PRACTICE IN THE NATIVE AMERICAN COMMUNITY

I. Introduction

Discuss each of these influences from the reservation perspective. Give concrete examples.

A) Geographic
B) Historical
C) Social Structure

II. Community Values

Discuss how they relate to supervision of the family practice worker. How do they relate to family practice?

A) Dual perspective
B) Group consensus versus individual
C) Cooperation versus competition
D) Communication patterns

III. Conclusion

A) Dual perspective
B) Acceptance of client values
C) Role of family practice worker in community

FAMILY PRACTICE IN THE NATIVE AMERICAN COMMUNITY
PRE-POST TEST

1. Define dual perspective and how the concept applies to Native American communities.

2. What role, generally, do the female community members play within the community political structure (who has the formal / informal power)? What is the historical premise for this practice?

3. What are three Native American community values and explain how these would influence the relationships of a supervisor to employee and family practice worker to the client?

4. What are the strengths of developing departmental policy on employee consensus?

5. When would cooperation within a department become a weakness? When would cooperation within a family become a weakness? Give specific examples.

GUIDELINES FOR EXPECTED OUTCOMES
FAMILY PRACTICE IN THE NATIVE AMERICAN COMMUNITY

I. FAMILY PRACTICE IN A NATIVE AMERICAN COMMUNITY

Contrast urban and reservation settings

A. Geographic differences
B. Housing conditions
C. Family constitution

II. DEFINE DUAL PERSPECTIVE

Conceptualize differences in dual perspective experience for an urban Native American versus a reservation Native American, *i.e.*, in terms of accessing resources, tribal pressure to conform, etc.

III. DEFINE CONCEPTS OF

A. Community values, influence on individuals, social policy
B. Community political structure, *i.e.*, tribal administration, council
C. Informal political structure, influence on social policy

IV. EXPLAIN HOW THESE NATIVE AMERICAN VALUES ARE APPLIED TO FAMILY PRACTICE AND SUPERVISION OF PRACTITIONERS

A. Concept of time
B. Group Consensus
C. Cooperation / interdependence
D. Communication patterns

CHAPTER 3

CASE MANAGEMENT

"Crisis on Friday: Grandmother needs help. Money has run out, baby Jim needs medical attention and diapers. Too late to contact the proper agencies. Worker shifts gears, assumes role orchestrating help around the client."

by:

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FOREWORD

This section, "Case Management," takes a supervisor of child welfare services through the steps of decision making, defining the concept of case management and the steps involved in actual procedures of service delivery. The material is interspersed with culturally sensitive perspectives intended to create a truly wholistic model, taking into consideration the Native American view of service delivery.

Learning Objectives:

1. To acquire a historical perspective on the concept of case management.

2. To gain awareness of how a person makes decisions rooted in values, knowledge, experience and understanding of situational factors.

3. To acquire cultural sensitivity in the application of case management techniques.

CASE MANAGEMENT

I. CONTEXTUAL FRAMEWORK OF CASE MANAGEMENT

The term "case management" seems a relatively new concept and may create apprehension among workers who may view it as another agency created task, more forms to complete. However, case management is a process evolved over the years and has other synonyms such as "case coordination." Case management has its roots in the early origins of social work in the 1860's and is concerned with the two basic elements, **efficiency** and **cost effectiveness**, of service delivery.

Early charity organizations kept track of client families on index cards to ensure that families did not receive two food baskets from different organizations. Later, social work pioneers like Mary Richmond and Jane Addams emphasized a client-oriented dimension to case management supporting direct contact with the client, individualization leading toward self-support and self-sufficiency. Their work was the basis for the development of professional standards and methods for acquiring data leading to the important concept of the case conference. The case conference required a determination of who should be involved and what service was needed.

Case management has been defined as "a set of logical steps and a process of interaction within a service network which assure that a client receives needed services in a supportive, effective, efficient and cost-effective manner" (Weil, Karls, & Associates, p.2). Case management has emerged as the method to demonstrate quality service delivery, service coordination to avoid "duplication of services," accountability and cost effective use of limited funds. More simply, case management is a planned set of actions, involving the client, managed by an individual, to ease the client's return to independent functioning as economically as possible. The goals of efficiency and cost-effectiveness are at times difficult to balance.

Case management involves an individual unrelated to the family unit, in the problem-solving process. This process is as alien to some Native American groups as is the whole concept of social service and involuntary intervention practiced by the dominant Anglo society. Charity work can be traced to the 1860's as a formalized expression of society to help the needy poor in America. Early social intervention with Native American families was a practice based on definition of need by another cultural group with differing values and standards. The acceptance of help by a Native American from Anglo, typically Christian groups, or from Native Americans working for the Bureau of Indian Affairs, was viewed with suspicion, principally as consorting with the opposition. The opposition was anyone who wanted, by persuasion or coercion, the Native Americans to change their lifestyle and behavior.

For many Native American groups, the reliance on a cash economy for self-support and independence did not occur until the 1940's. At the same time, alcohol consumption rendered some individuals incapable of providing basic needs for themselves and their families. The integrity of Native American society was trampled; the conveniences of the American lifestyle were too appealing to refuse, causing societal values to be compromised. The concept of education outside the extended family and Native American society splintered the extended family unit, societal cohesion and the child's cultural development.

Direct social intervention by White America in the life of many Southwest Native American groups did not occur until the 1920's. The primary purpose was to provide "quality" education and was targeted at the youth population. This education meant teaching, in a formalized classroom setting, basics of reading, mathematics and living the life style of the American citizen. This was best achieved by removing the child from the Native American society and re-molding his/her thought processes and values. Some youth spent most of their childhood, beginning as early as six (6) years, through high school age, in boarding schools. During the 1950's many Hopi teenagers lived with Anglo families, typically in California, for three or four of their adolescent years. The decision by many parents to allow this was sanctioned by Native American elders so that tribes, through a segment of its population schooled in American ways and thinking, would enable the tribe to interact with the American society on its own terms.

The manner in which these social interventions took place, particularly in the 1920's, was often forced and patronizing, leaving "clients" little or no voice in the plan of action. Certainly case management, as it was evolving on the East Coast, had no parallels in the western United States to integrate the world of the client in case planning.

Prior to the dramatic intrusion of sharply contrasting cultural standards and lifestyles by a more developed industrial society, Native American society had its own support system, based upon kinship and values emphasizing reciprocity and generosity, to aid its "needy poor." The Native American household rarely existed only as the nuclear family, but rather as a household comprising the parents, children, grandparents and adult children who had not established their own dwelling. Among the Hopi in particular, adult children who did not marry remained in their parents' home. Bachelors eventually may acquire their own sleeping area apart from the main family dwelling, but will eat their meals at the mother's home, tend her fields, harvest, haul wood and engage in supportive activities for the mother (or female head of household). In turn, the mother may engage in supportive activities for the bachelor during ceremonial events and other activities requiring female support.

Clothing and food for the early Native American remained extremely basic. Those households, usually childless elderly couples, who were having difficulty providing for their basic food on occasion received meals from their adult nieces, clan derived daughters-in-law, and other women extending their generosity. Young men would chop fire wood for their aunts or grandmothers with a sense of pride and helpfulness.

Among many Native American groups, generosity and reciprocity were highly functional values. If a man was ready to have his field planted, he made this announcement

to the village and male members would help him to plant. The women provided food at noon as compensation and in gratitude for the workers. This kind of reciprocity was given without thought as to receipt of monetary payments or whether the same man would reciprocate.

Kinship ties in varied form among Native American groups reinforced the values of generosity and reciprocity. As well, among some tribes, the duties of daughters - and sons-in-law held them to certain areas of responsibility at ceremonial events.

When a person became ill, physically or mentally, the responsibility for seeking outside intervention rested with the individual or family. Depending on the malady, the person was taken to the appropriate native medicine practitioner or society member endowed or entrusted with healing powers. This sense of family ownership of the "problem" was clearly understood; definition of the problem and means to alleviate the pain rested with the individual or family. In some Native American groups, family ownership extended to the clan, widening the number of people involved in the situation. It was understood that a clan member had some "ownership" and "say-so" about the problem. A person's social deviance reflected on the social status of the extended family and the clan, yet rarely was the person disowned by the family and clan.

Kinship systems among Native Americans varied but each determined the individual's role and status within the given society. Kinships and clanships determined the social interactions among people and the role an individual played in a problem situation, if any. For instance, it would be inappropriate to expect daughters-in-law or sons-in-law, particularly among the Navajo and Hopi, to play integral roles in certain problem solving situations of the family.

Social intervention, as it functions in the larger American society, is an alien concept to many Native American groups, and, for some, is regarded as consorting with the opposition, typically "the White government." For instance, an Indian group may turn down federal monies believing that acceptance will make the group indebted to the federal government now or in the far future in ways that would be beyond their ability to repay or will compromise the values of the Indian group. Some Native American groups are very conservative and stigmatize any "welfare" assistance as dependency. This view can be very counterproductive for those seeking mental health services who may not feel supported by their family or community. This criticism is not present when individuals seek help from native mental health practitioners. However, a need may exist for Native Americans to seek help for problems, such as alcohol abuse and spousal abuse, which indigenous systems may not address adequately. Because alcohol or drug abuse was not present in the traditional Indian society, indigenous practitioners, initially, may not have a method for alleviating the addictive habit other than to give strength and revive the spirituality of the recovering person. Traditional practice, coupled with Alcoholics Anonymous, would be an optimal treatment modality.

Case management is a process congruent with the wholistic structure and dynamics of the extended family/clan to which a Native American belongs. Case management is a

process acknowledging that a client's needs may require more than one helper or agency and these efforts must be coordinated. The case management process operates according to the general systems theory which postulates that parts make the whole; whatever happens to a part, the whole is affected. Though presented in extremely simplistic terms, this concept applies to the Native American quite well. The Native American is never alone; she/he might feel alone, but the person is part of the nuclear family, the extended family, the clan group (if it exists for the particular tribe) and the spiritual community. Therapeutic intervention often affirms this belonging. When the individual marries or goes through societal rites and perhaps gains a godparent, the links are further expanded and strengthened.

II. HOW DECISIONS ARE MADE

Social workers and administrators involved in child welfare services make numerous decisions every work day and sometimes spend sleepless nights thinking about decisions made or decisions to be made. Decision making involves conscious and unconscious processing.

> Case example: A fifty-five year old woman named Agnes Benson comes to the social service office with a two year old grandson, Jimmy, who has the sniffles. Agnes' hand is bandaged. She is asking for money to buy disposable diapers for the boy. Agnes volunteers that the boy's mother has not been home for the past two weeks and she has no money. She has only four diapers remaining which probably will be used up before the day's end.

1. Worker A, who has been with the agency one month, begins her initial line of inquiry to establish the length of the mother's absence from the home, the frequency of this occurrence, to decide if a referral to the child protective service unit is warranted. Being a previous CPS worker, she is interested in the boy's continued need for diapers at his age, how long the woman had been taking care of the boy, observes the boy's skin color, height, weight and demeanor.
2. Worker B, who now has been with the agency for five years, begins her initial line of inquiry about the well-being of the grandmother, then the child, establishing who the father is. The worker may answer the grandmother's questions about where the worker now lives and to whom she/he is married. The worker is interested in establishing a working relationship with the grandmother. The worker asks the grandmother how she had been able to obtain diapers for the boy up to this point, allowing the grandmother to talk about her injury and how it is preventing her from making and selling craftwork.

Random House defines "decide" as "to make up one's mind clearly and firmly as to what to do." Alfred Kuhn defines decision as "a response selection under conditions of uncertainty." The latter definition presumes that one cannot have all the information to make the best decision but a decision has to be made.

To make a decision involves defining the problem, gathering and screening relevant information, weighing the information and "making up one's mind.....as to what to do." How these stages are set are influenced by a number of factors:

> Cultural and personal values: lifestyles, attitudes, customs, spirituality, traditions passed on to an individual, some of which might be unconsciously held. Worker B might be a 25 year old of the local community, knows this woman and begins the interaction on a casual basis to acknowledge the woman, giving her due respect as an older person, then leading to the request at hand.
>
> Professional knowledge: information acquired from professional schooling, theories, models, principles that guide techniques of inquiry, how information is framed and assessed. Worker A might have been a previous child protective service worker and latched on to the information about the mother's absence from the home, prioritizing this as the primary problem. Worker B might have worked as a nurse's

aide in her prior work history and focused on the boy's health even though he was patiently sitting on a chair, somewhat uncharacteristic of a child his age, when he would be expected to be less patient.

Personal and professional knowledge: knowledge gained from personal life experience and knowledge gained from work; knowledge gained perhaps from a mentor such as a supervisor or from a grandmother. Worker B might hold back a tendency to quickly define what the problem is from her perspective and allow the grandmother to provide as much information on her own, using active listening skills to elicit other information.

Recognition of situational factors: information about existing resources and time considerations as well as political and social factors that influence the working environment. If the grandmother had come in on a Friday afternoon, both of the workers would invariably need to consider whether diapers are on hand for emergencies or whether other paperwork would need to be effected to obtain a voucher to make the purchase (AILC, AZ DES ACYF).

Values and knowledge determine what is acceptable to us and how we behave toward others. This composite will vary throughout a person's life as each experiences different life events and knowledge. The key is the understanding that values and knowledge form our "modus operandi," what we perceive, how we assess a situation and how we decide to act.

Each of the workers presented begins from a different perspective, consciously or unconsciously adhering to a set of rules. Everyone does this; however, if each continued in this solitary fashion some vital piece of information or alternative avenues of investigation might be excluded as decisions are made. In many agencies, the practice of case conferences and clinical supervision provides the worker with alternative plans.

III. TYPES OF DECISIONS

From the simple case example presented, it is apparent that several decisions are to be made. Here are some types of decisions social work case managers make:

1. The Totalitarian Decision. Each worker could have arrived at a decision to help the grandmother Agnes with obtaining diapers without any information and making known this decision to the grandmother at the closure of the first interview. Other decisions to be made are what kind of diapers, how soon they would need to be obtained and by what means.
2. The Advisement Decision. A worker could leave the interview room, seek advice and suggestions from a co-worker or supervisor and then make a decision by him or herself. Co-workers or supervisors might have limited influence on the decision outcome. Indeed, the worker may not explain the whole situation to the co-worker, perhaps seeking information on the stability of the grandmother who is to receive monetary assistance. Or the worker might ask the supervisor or secretary about the feasibility of obtaining a voucher within the same day. The worker owns the decision in this case with information gleaned from others.
3. The Shared Decision. The new worker may not know the grandmother at all but has an intuitive feeling that she is not relating the full circumstances of her caretaker role. The worker might meet with a co-worker or supervisor to relate the contents of the interview. She might be informed that this is the second time Agnes has come into the office within a month and at the first visit she explained her daughter's absence as having a hospital appointment at the same hour. The worker would return to the interview with this vital information and probe for more information on the boy's family situation. In this case, the worker makes a decision based in part on information colleagues share.
4. The Joint Decision. Having made a decision to help the grandmother with the request for diapers, the new worker has more information about the two year old boy and the absent young mother. The second decision about whether she should make a referral to the child protective service unit is derived from a joint meeting with the supervisor and co-workers. The degree of risk to the child, the grandmother's state of health and the young mother's past history are discussed. The primary worker facilitates this discussion and a joint decision is made on the next step in this case. Other's feelings and information have influence over the final decision.
5. The Delegated Decision. Perhaps the worker who initially accepted this request for assistance was primarily a financial eligibility worker who made a decision on whether to provide assistance to the grandmother solely on appraisal of current financial resources. However, the worker, concerned about the family situation,

decided to refer the matter to a child welfare worker for further assessment of the child's well-being. The original worker may delegate this second decision to another worker, but prior to doing so, may check with the supervisor realizing that it might mean serious consequences for the grandmother, the two year old boy or the boy's mother (AILC, AZ DES ACYF).

Of course, there are other kinds of decisions by which the worker may receive information from the grandmother, observe the boy and state to the grandmother, "I'll go to my supervisor and see if she will approve your request for diapers. I don't know all the regulations of our program. Today is Friday and the finance department is closed!"

When formulating a decision, two factors should be considered. The worker should try to maximize "decision acceptance," the degree of commitment to carry out a decision. Perhaps the worker has arrived at a decision: she will assist the grandmother with enough diapers to last a week contingent on the grandmother's willingness to have a parent aide visit her during the week jointly to assess spending of the AFDC money she receives for the boy. The grandmother initially might be resistant to having the worker come to her home; however, the worker can highlight the resources available to the grandmother, praise her willingness to care for the boy and cite the positive benefits of parent aide services. The grandmother, thereby, is encouraged to accept the social worker's decision.

The second factor involves "decision quality." All the persons involved in making the decision to refer the matter to child protective services, believe it to be the best decision under the circumstances and this is supported by tangible proof (the boy's state of health) to confirm this belief.

IV. ROLE OF THE CASE MANAGER

Let us suppose that in looking back at some old case records, one finds a case file for a family encompassing services provided intermittently over several years. Service might have been given for a one-time General Assistance grant or the children might have required foster placement briefly when the mother was in the hospital for an extended period and the father was away from the home reservation. This foster care could have been with extended family. The social worker also might have provided grief counseling to the family at a different time. This type of social worker may be termed a generalist, a worker who is responsible for screening the family's needs, providing psychological counseling and other services available through his or her agency.

Times change, societal conditions change, social conditions community members find unacceptable change and agencies have to change the way services are provided; nor can one agency provide all the services under one roof. Cases evolving today are sometimes referred to as the "multi-problem" family or individual. The generalist social worker can no longer provide all the needed services either because the services are outside of her agency or she no longer has time, based on the huge caseload, to provide counseling services. The worker then shifts into a case manager role orchestrating a delivery system around the client.

Such a delivery system for the client Agnes Benson and her two year old grandson, Jimmy, might mean a home-bound stimulation program for the boy, home visits by the Field Health Nurse for both the grandmother and grandson, and parent aide services. Each of these services may exist outside of the worker's agency.

A case manager may play a role in crisis intervention, bringing equilibrium to the client's perceived state of crisis. If needed services do not exist within the worker's means to provide them, she/he must be aware of resources. The worker must have some knowledge of the program or agency which offers the service and what is required to obtain it (eligibility requirements, timelines, program philosophy). The worker must be knowledgeable in making proper referrals so the client is not set up for failure or false expectations.

Returning to Agnes Benson and her grandson, once the three services are acquired for her, the case manager as "orchestra leader" must facilitate the interaction between the agencies providing service and the client. The general systems theory postulates that the natural tendency for a system not kept in motion is atrophy. Therefore, the case manager not only monitors the service delivery but must also provide positive reinforcement to all players, including the client. A brief note sent to the Field Health Nurse's supervisor thanking the agency for maintaining their home visits builds community. A problem may arise between the parent aide and grandmother over seeming differences on parenting. The case manager may take this opportunity to serve as a facilitator by helping to explain a diagnosis such as Fetal Alcohol Effect, and explore expectations the grandmother has of the child. Case conferences would bring all the players together to review progress made or to revise service plans.

The case manager might also play a role in community advocacy and organization. Perhaps Agnes' daughter had alcohol abuse problems; the grandmother might benefit from an Al-Anon group which the case manager could help to organize. If the community's building superintendent were not willing to have the Al-anon group use a room free of charge, the case manager might serve as an educator and meet with village leaders enlightening them on the benefits of such a self-help group and advocate for the Al-Anon group.

V. CASE MANAGEMENT SKILLS

In performing case management functions, the social worker relies on the basic principles and concepts of social work practice. Many of these skills are derived from the objectives and skills cited by Rosalie Kane and the Berkeley Planning Associates (Weil, *et. al.*). Foremost is the social worker's own self-confidence and self-respect in the role of case manager. The case manager must have confidence in herself as a social work professional, as well as respect for the professions of other team members. Historically, social workers have made a long climb in establishing social work as a profession in its own right and remnants of doubt still exist in the minds of other professionals. As well, the procedures and standards of social work are different from those of other professions. The number of individuals a social worker works with is also different. A pediatrician may interview only the child and mother about a sexual abuse case, prepare a report and have interactions primarily with the criminal investigator and child protective services worker. The social worker will have interviewed the child and mother as well as the rest of the family members, possibly other significant extended family members. Obtaining information to determine the continued safety of the child could mean repeated visits to develop a working relationship. These differences in procedure and scope may require the case manager to engage in the continued education of other team members about the profession of social work.

The case manager continually must balance the client's self-determination with her expectations for change in the client. Recognition of client self-determination in the social work process also will help the case manager to maintain a realistic expectation of herself as social worker:

> The social worker entered the home of a middle-aged woman. The woman was wheel-chair bound and had shown some depression. On this day, she was home with her husband. He remained in the back kitchen area and consented to nursing home placement due to family instability caused by alcoholism and lack of consistent and dependable care. She appeared reasonably well-groomed on this day. The social worker was at the home to compile a social summary to submit with the other required documents for nursing home admission. At the end of the home visit, as the social worker was preparing to leave, the woman said to the worker, "Well, I'll go along with whatever plan you make for me." The social worker sat back on the sofa and responded, "We began this process because you had consented to this plan, but if you are going along with this plan to please me, then we need to stop here and discuss nursing home placement from the beginning. Placement will occur only if you truly want it." The outcome of this case was that the woman did not enter the nursing home even though there was some risk to her health at home, but she made the decision. Home bound services were provided to the woman.

With the exception of children and others who cannot fend for themselves, clients have a right to determine what action they will take, even though exercising that right may prove detrimental to their well-being. For instance, if a parent fails to fulfill the conditions

of a family court, he/she may end up in jail. To the case manager, this might mean a longer time for the children to remain in foster care.

Unfortunately, this development often is interpreted by some team members as a glitch in the case management, somehow reflecting on the social worker's handling of the case. When the social worker takes blame (verbally or through "body language") for the client's transgression, he/she takes on "ownership" of the incarceration problem which should belong to the parent. In the example of the woman who did not enter a nursing home, if one day she were found at home not having been provided breakfast and lunch, the social worker may feel some anger directed at the family and, possibly, some at herself for not having been more aggressive in having the woman see the need for placement. However, the woman had made the decision for herself to remain at home.

Other personal attributes the case manager should possess include respect for, and confidence in, others. The case manager should be aware of the varying degrees of life experience, education and training of other team players and workers in the agencies to whom referrals are made or whose cooperation the case manager seeks. A case manager who refers a client to a therapist whose skills the case manager questions, sets up for failure from the outset, expectations of the client and case manager. The case manager must decide whether to refer at all or determine what level of service can be expected of the therapist that would be acceptable. When resources are scarce, case managers often find themselves in this dilemma and do not assess pragmatically.

The case manager must be willing to share, to trust and engage in teamwork. Not only should protocols be followed for client confidentiality and sharing of information between team members, but the case manager also must serve as a group facilitator for the team and have a working knowledge of group process.

In facilitating the group process and monitoring the service delivery of other service agencies to the client, the case manager should possess a basic knowledge of human behavior and understand the reactions of the team members and the client in the group process. The case manager must have a tolerance for disagreement and a degree of flexibility. Because team members may come from different professional disciplines, arriving at a service plan or deciding when best to return children to the natural parents may not evolve smoothly.

To develop a realistic service plan and a good working relationship with a client, it is imperative to understand community attitudes and help seeking behavior. If community attitudes are not understanding and supportive of the dilemma of spouse abuse, then the case manager should recognize the great effort it took a wife to seek help and voluntarily seek temporary foster care for her children while she entered some type of treatment program. Furthermore, it would behoove the case manager and client to be more circumspect with persons in the client's family system to whom she could reach out for support.

To enhance her managerial role of the case management team, the worker should maintain a degree of autonomy within one's own organization. If the case manager must check with the supervisor on every decision involving the organization's service to the client,

the case manager's leadership of the team is diminished. Although it is improbable that the case manager would know all the regulations of her particular service unit, one should possess a working knowledge of applicable regulations. Also, if the case manager does not have the authority to enter into an area of service, the client and team should not be left with vague probabilities raising expectations ("It probably can be approved.").

Establishing a good working relationship between the case manager and client is a critical factor in the likelihood for client change. This does not mean that the case manager and client become close friends, but that communication is established between them, and expectations of each other are clear at the outset. A key factor in a client's progress is the frequency of contacts by the case manager. A case manager can be excellent at coordinating services, writing requests on behalf of the client and conducting other advocacy missions, but this might be done at the expense of the client's need for support or presence in the process. This includes personal contact on a consistent and predictable basis.

Clients who enter the social service system through involuntary means can blame their non-compliance or lack of progression on the case manager or other agencies to whom the client was referred if the working relationship is faulty. The case manager must have good communication skills, verbal and written. Even something so simple as the habit of using compound sentences can lead to trouble if the client catches only parts of the message. The best mechanism for outlining expectations of the client is the written service plan which states what the objectives are, who is to do what, deadlines and how an objective is to be met. The case manager should develop skills in writing behavioral objectives that can be understood by the client and participating team members. Sometimes in-service training might be necessary to achieve this skill. Objectives in a service plan should be written in clear language, listing behavioral actions to be met by a specific time.

Oral and written communication skills include interview skills, preparation of court reports, home study reports and the social summary. Before any of these skills can be implemented, the social worker or any other helping professional must have a working knowledge of the help-seeking behaviors of a community or society. Among many Native American groups, seeking assistance from a mental health therapist is not commonplace.

In any society, it takes courage and strength to acknowledge a problem and even more to seek help outside the family. In Indian societies, seeking help initially probably would be made to a native practitioner. To seek help from a therapist trained in Anglicized techniques and schools of thought requires even greater strength. Too many therapists and counselors minimize or do not acknowledge this strength and effort; they give up on the client's progress too quickly not realizing the competing tasks and problems the client must also attend to. A client who is highly involved in cultural affairs cannot focus consistent attention and commitment to one's therapeutic sessions or appointments with the social worker when obligations affect other family or community members.

With the multitude of tasks a social worker or counselor must complete, efficiency requires that meetings begin on time and do not extend beyond the prescribed hour, are

focused on issues to be discussed and information to be obtained. Rapid-fire questioning and zoning in on issues offends many Native American clients who are accustomed to a prelude of non-threatening conversation. If the worker is of the community, she/he begins the interview by confirming the relationship that may exist between the worker and client, however distant it may be. Then a discussion may take place regarding the social problem the client or family has, leading to the specific issue. This process, which may take more than one interview session, legitimizes and acknowledges the client's relationship to the worker, bringing the leadership of the dyad to the worker. This is done in a manner which allows the client to save face, particularly if the client is much older than the social worker, and still be a partner in the process for change.

In rural or reservation communities, many of the client contacts are conducted in the home. Extensive travel is likely to be involved making a must the careful planning of an interview. Of course, there is a risk other persons might show up unexpectedly causing the social worker to make a fast decision whether to wait until the visitor leaves or re-schedule the interview. Conscious planning is recommended:

1. What is the purpose of the interview? How does it relate to the case plan?
   a. What information must be obtained to meet the purpose?
   b. What information must be given?
   c. How long will it be?

2. Whom do you need to see?
   a. Can you interview more than one person together?

3. Where should the interview take place?
   a. At home or neutral place?
   b. By appointment or not?

4. Planning for the emotional climate: social worker's feelings, client's feelings
   a. Honesty, openness
   b. Encouragement

Conscious planning for an assessment of an individual or family also is required. This should begin with a clear understanding of the purpose of the assessment and the authority, *i.e.*, court ordered or voluntary consent, to support that purpose. The goal of an assessment is to form a wholistic perception of the presenting problem as it is reflected in the family. The interviewer obtains information from the primary client, if verbally proficient, family members and collateral resources. Thereafter, using social work assessment skills the social worker answers the question being posed, making a clear and concise recommendation to the requesting agent.

The Social Summary Format

Date of Report:

Reason / Purpose for Home Assessment:
Report Prepared By: (If program procedures require it, signature of person reviewing and/or concurring with report)

Name of Client:
Home Assessment of:
Primary Client:
Family:
Work (or School):
Friends / Peers:
Cultural / Spiritual:
Physical, Mental Health:
Social Worker Impressions:
Recommendations:

Most programs have standard client in-take forms and questions; however, a listing of the interview areas is presented. Needless to say, covering these areas will take more than one interview:

Family Information Sheet

How many?
Dates of Birth:
Alcohol Abuse Present?
Village or cluster (Location):
Clan:
Parents' Names:
Education:
Location of House:
Census Number:
Children:
Marriage:
Religion:
Minor Children:
Grown Children:
Deceased Family:
Family Constellation:
Sexual Issues:

I. <u>Family</u>

Evidence of abuse, neglect or exploitation.
Precipitating events leading to the CPS incident.
Other critical stressors, major changes such as moves, deaths, losses, placement in foster care.

Family Dynamics:

1. Mother's History - Repeated crises, own childhood with parents, perception of role as a parent, history each pregnancy.
2. Father's History - Repeated crises, own childhood with parents, perception of role as parent.
3. Marriage History - For each parent.
4. Mother-Child interaction as defined by the mother; the child's perception also may be included.
5. Father-Child interaction as defined by the father; the child's perception also may be included.
6. Interaction between children as perceived by the parent(s) and children.
7. Interaction between family, its extended family and neighbors as perceived by the parent(s) and child(ren).
8. Employment history of each parent.
9. Family Legal History-Any criminal involvement of children and of parents, (as children and adults).

II. Social History Outline

The purpose for obtaining the social history includes identification of the following:

1. All family members and significant others and their interrelationships.
2. Factors leading to the present problem.
3. Coping methods the family has used in the past that might be applied in the present.
4. Possible personal, family and community resources in planning for the family.
5. Clues which will indicate the optimal case plan for this individual family and the children in it.
5. The risk to the child.

Work

Are you employed?
How do you get money?
In-kind assistance?
Skills?
Where do you work?
How many jobs?
Work history?
Do you receive training?
Earnings?
Debts, bills?
Supervisor?
Who in home has work?
How do you relate with supervisor?

School

History
Teachers
Subjects
Favorite class / subject
Least favorite class / subject
Grades
Sports
Activities
Child's perception of performance
Parent's perception of child's performance

Friends / Peers

Do you have friends?
Do you have a close friend?
To whom do you go when you have a problem?
Do you have a boyfriend / girlfriend?
How much time with your friends?
What do you do with your friends?
Do you party with friends?
Do you have long lasting friendships?
Is it easy for you to make friends?
Do your friends live near you?
How do your friends treat you?

Cultural / Spiritual

Are children initiated in cultural rites?
Do you participate in ceremonies?
Do you speak / understand (Hopi)?
Do you believe in the (Hopi) way?
Do you attend a church?
Were you raised (Hopi)?
When did you last participate in ceremonies?
Is family involved in ceremonies?
(Hopi) wedding?
Other tribe? participate?
Do spouses belong to same clan, village, tribe?
Is this a problem?
Society membership?
Have you seen a medicine person?

Information should be recorded in an objective manner. Case manager conclusions should be stated clearly as conclusions or interpretations of objective facts. Sources of information must be documented in the case record.

Preliminary history may be legibly handwritten. Additional information will be added to the social history as it becomes available.

If the information is not sought in the course of the investigation and if the children have not been adjudicated, parents must sign an Authority to Release Information.

Teachers and school personnel who have observed the behavior of their students and families are information sources as are physicians, and other professionals such as psychiatrists, psychologists or counseling agencies who are working with the family. A medical history is especially important for out of home cases, including adoption.

The case manager must be cognizant of the quality of the working relationships with participating collateral agencies, foster parents and anyone else involved in the case. Cooperation by any member of the team should be positively reinforced from time to time. Sometimes case managers encounter delays and resistance from other agencies in providing services to the client. Inter-personal conflict can drain valuable time and energy from the case manager if left to fester. The case manager must re-evaluate one's expectations of the other person or agency or engage in relationship problem-solving.

In handling delays and resistance from other agencies, seeking the supervisor's assistance and intervention is one strategy. However, a supervisor's intervention should be undertaken after careful consideration and as a last resort because the case manager's continued role as team leader may be compromised. Interception by a supervisor should be reserved for those situations where advocacy potentially will benefit other clients, will set a precedent for future interagency working relationships or where an agency principle or policy is involved. The best strategy is for the case manager to approach the "resistant" counselor and have a one-to-one discussion in which the case manager presents perceptions of delays or resistance. This could eliminate any misunderstanding or create more awareness of each other's needs and expectations.

For the case manager to be effective, she performs a brokering function and as such must possess a knowledge of community resources, formal and indigenous, *and* be assertive. The case manager as a "broker" acts on behalf of the client, making the connection, perhaps participating directly in the services or monitoring the client's receipt of services and sometimes advocating for client services. The case manager, or her program, can make the connection with the community resource, prior to the client's entry into the system. The social service agency and community resource would have arrived at an agreement on which clients may be referred to the resource agency and how follow-up communications will be conducted.

In some communities, indigenous resources, such as Native American medicine persons or healers, are made a part of the formal human service organization. In other communities, they function independent of formalized helping agencies. In the latter, the case manager can recommend to the client to seek help from a local medicine person. Following through on the recommendation would be left entirely up to the client. Follow-up information would come solely from the client, dependent on information the client would be willing to share.

The case manager must know the existing community resources, some knowledge of their intake procedures and philosophy of helping. This includes self-help groups such

as Alcoholics Anonymous, women's support groups and the like. Participation in self-help groups usually is voluntary and based on anonymity. Although some courts may order a parent to attend a self-help group, the group which places sole responsibility of attendance on the client may be unwilling to place itself in the position of monitoring the client's attendance.

Many times a case manager has saved valuable time and obtained information quickly by having contacts within other service organizations to whom telephone calls can be made, presenting a hypothetical case and getting a fair probability for a client's eligibility for their services. This works well when the resource agency's intake procedures are fairly complex and lengthy. The client is prevented from going on a goose chase to obtain services. Of course, this direct contact should be limited to cases that are out of the ordinary and the client has major restraints in going from agency to agency.

VI. VALUE CLARIFICATION RELATIVE TO WORKER ATTITUDES

When social workers enter the human service field, they often begin with well meant motives of helping others. Many human service workers (lay and professional) have helping skills that lend themselves well to this profession, as a natural part of their personalities. Once the novitiates enter the trenches of social work, they are confronted with a myriad of social problems, diverse cultural groups, and technical requisites (forms, computers, case records, etc.). Social workers often come face to face with situations and problems that run counter to their preferred lifestyles or that ignite unresolved personal issues. These may create conflicting feelings in the worker, if left unresolved, and may hamper the effectiveness of case management and the worker's well being.

Illustrations are (a) the social worker feeling disgust upon entering a home and finding it extremely dirty and unkempt, or (b) feeling a sense of derision for the woman who adamantly refuses to file a complaint against her common-law husband for physical abuse. These phenomena are referred to as value collisions in parenting texts, and elsewhere, but are applicable to the social worker / client situation as well *(Pa-ung-ni Parenting Manual*, p. 9).

The social worker must first recognize and acknowledge that this conflict exists within oneself, seek resolution and ensure that this perception does not unfairly influence his/her working relationship with and treatment plan of, the client. The social worker or case manager, in this instance, might be tempted to use power over the client, *e.g.*, the natural parent, *vis a vis* a court order stipulating certain required changes of the parent before the child can be returned to parental custody. Although such a court order may exist, it is highly preferable to arrive at a separate agreement, *i.e.*, the service plan, between the case manager and client. This service plan should be signed by all participating parties. The service plan establishes the working relationship between the client (natural parent) and case manager. If the value of maintaining a clean and well-kept household is one the case manager and agency wish to have their client adopt, one method is **modeling.** The case manager may enlist the assistance of a parent aide who can be the primary support person to develop a close relationship with the client and engage in awareness and educational activities.

In the case of the woman who is physically abused, if the relationship between the case manager and client is positive, the case manager herself or another therapist could influence the client's behavior and future response to abuse through **consultation** or **discussion (therapy).** Once the client is open to discussion, the manager or therapist can present his/her case *via* education about the cycle of abuse or therapy itself. In contrast, use of power or authority by the case manager (or social worker) to pressure the woman to report abuse to the police and file a complaint may result in future disownership of the action by the woman, negating the legitimacy of action. This may result in the client less willing to listen to the case manager's future suggestions or educational efforts, loss of confidence in the case manager or therapist, or diminished commitment by client to pursue his/her obligation to the service plan.

In untangling value collisions regarding the unkempt house, the case manager may have to **modify** her value regarding spotless homes if the parent were able to demonstrate adequate parenting skills but could not meet the standards of neatness held by the case manager. What happens is that the case manager will accept the level of improvement made in household maintenance but still retain the higher standard for herself.

What seems to be the key in working day in and day out, harboring personal feelings regarding the client's behavior, is the worker's acknowledgement of the existence of these feelings and the means to ventilate these feelings instead of maintaining a stoic demeanor. The reverse action is blowing up in front of a co-worker causing his day to sour. One way to alleviate this pressure is the effective use of supervision. Supervision is a tool to monitor the timeliness and effective strategy of helping the client; it can also be a means of providing technical and emotional support to the social worker to increase worker effectiveness and decrease chances for rapid burn-out. Another means is collateral consultancy with fellow workers in sharing personal feelings about a client situation. At best, workers will know that others share similar dilemmas and how they resolved similar situations.

A case manager may require therapeutic intervention for her or himself if a client's personal or family problem evokes heretofore hidden feelings of being victimized in his or her own life. Child sexual abuse is a classic example illustrating how people, male and female, have been victimized early in life and, without having benefit of therapeutic intervention, still have developed competent professional careers. However, a case manager after being confronted with information describing the client's victimization, can no longer keep personal feelings from rising to the surface. At some point, the intensity of one's own personal feelings can be such that these feelings intrude into her day-to-day functioning at home and work. Or similarly, emotional upheavals may afflict those social workers who never may have been confronted with such abuse upon children; they may have too much difficulty integrating the scope and intensity of such information to be able to deal with their feelings. These social workers need support and therapy, for themselves, to deal with personal issues.

Facing and solving for themselves the conflicting situations which challenge their value systems is a necessity for social workers if they are to succeed in realizing, and appreciating, satisfaction in the choice of work and practice of professional conduct. Professional development is a vital component in the maturing process of effective social work. These imperatives make it important for the social worker to come to grips with the realities of life. This means being able to balance what is sometimes harsh reality with her learned skills and clinical support, either in terms of supervision or therapy for herself. These seem at odds, yet the best way to balance harsh realities is for one to recognize her own and her client's strengths and positive qualities.

BIBLIOGRAPHY

Improving Practitioner Decision Making; American Indian Law Center and Arizona State Department of Economic Security, Administration for Children, Youth and Families, 1987.

Kuhn, A. J., *The Logic of Social Systems: A Unified, Deductive, System - Based Approach to Social Science*, San Francisco: Jossey-Bass, 1974.

Pa-ung-ni Parenting Manual; Hopi Behavioral Services, Second Mesa, AZ.

Weil, Marie, James M. Karls and Associates, *Case Management in Human Service Practice*, San Francisco: Jossey-Bass, 1989.

DISCUSSION QUESTIONS

SECTION I

1. What theory underlies case management?

2. In what manner can the aforementioned theory be congruent with Native American world view?

3. What are TWO key Native American values that support case management?

SECTION II

1. Decision making involves _____ and _____processing.

2. What are the steps needed in decision making?

3. What are the factors that influence decision making?

SECTION III

1. What are five types of decisions and give an example of each?

2. What is meant by decision acceptance?

SECTION IV

1. In the Agnes Benson illustration case, what are the potential roles of the case manager?

2. How may these roles reflect cultural sensitivity?

SECTION V

1. In a "team approach" a social work case manager often will be engaged in continuing education of its team members around_____ and_____.

2. What are two key personal attributes a case manager should possess?

3. In utilizing group skills during case management conferences, an effective case manager who is a team leader must possess two important qualities: they are.

4. How would a worker who utilizes case management with Native American clients make it culturally sensitive?

SECTION IV

1. Why is value clarification important and how is this accomplished?

CHAPTER 4

MANAGEMENT SKILLS: GRANTS, CONTRACTS

"Well, ah, primarily, you have to fill out a form IIOIOMB, which is the BIA, NOT the IHS, format: of course, you need to comply with whatever the RFP requires..."

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BEST COPY AVAILABLE

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MANAGEMENT SKILLS: GRANTS, CONTRACTS

TRIBAL ORIENTATION

In working with grants and people who write and work under grant funded projects, it is clear that grants appear to be very mysterious and fear producing processes. Much time needs to be spent in converting the fear inducing, mystical powers of grants and contracts into management skills.

Few agencies in today's world survive without the grant and contract process. Few of us in the child welfare field are naturally gifted with grant writing and contract management skills; each of us has had to develop those skills over extended periods of our careers. In addition, most of us in the child welfare area would rather work with the client than spend hours on the technical issues of contract management. We often do not see the need or value in the paperwork aspects of the job.

Tribal management systems have evolved on their own for several years. Most people do not realize that it has been only since 1978 that most tribal governments have been administering and operating social service programs through the Indian Self-Determination Act.

In reality, most tribes have been in the business of providing child welfare services for less than 12 years. With this in mind, it is easy to see that many of the systems that are set up in the mainstream culture are not available or applicable in Indian country. The nature of this new process of obtaining grants and contracts can range from sheer chaos to controlled chaos. Tribal programs are only as good as the individuals who are chosen to direct them; in some cases there are qualified individuals to fill the jobs and in other cases the positions are filled regardless of qualifications. The policies and circumstances regarding employment cause great diversity in the quality of programs throughout Indian country.

In social service programs, there seem to be more people attracted to that area who have relationship skills but lack paper skills. Most of us in social services would rather talk to human beings than to fill out paper work. In Indian country, there often is an aversion to paper work, perhaps because of language difficulties. Many are unable to express themselves effectively in written English. Non-Indian supervisors may not understand readily the difficulty in converting thoughts from the native language to English, and then to write those thoughts in English. This process of documentation is a foreign notion in Indian country, but as we pursue more resources from the mainstream culture, documentation becomes a necessity for survival.

RESOURCE SURVEY

The first word of advice, in the area of contract and grant skills, is TRAINING. This area is one in which being overtrained can be an asset. Employers should invest money in training for supervisors if there is an expectation that the position will involve the management of grant funded programs. Training can come from as many different sources as there are sources for grant funds. It is important to take advantage of all pre-proposal conferences and technical assistance workshops. Both can be great sources of information. The following is a partial listing of training resources for grants:

- The Grantsmanship Center
  Department DD
  P.O. Box 6210
  Los Angeles, CA 90014

- Three Feathers Associates
  P.O. Box 5508
  Norman, OK 73070
  Phone: (405) 360-2919

- National Indian justice Center
  The McNear Building
  #7 Fourth Street, Ste. 28
  Petaluma, CA 94952
  Phone: (707) 762-8113

- Inter Tribal Council of Arizona
  4205 North Seventh Avenue, Ste. 200
  Phoenix, AZ 85013
  Phone: (602) 248-0071

Also, there are a number of private consultants who are available to provide grant training and they can be located through your local university or Indian center.

Other helpful tribal resources are those people currently writing grants and monitoring funded programs. Speaking with those grant administrators can be an effective way to learn about contracting and agency networking. Another recommendation for experience and training is to read grants which have been funded so that you can begin to understand the "fit" of the grant process. There is a natural flow to grants that will begin to emerge for you as you gain more training and experience with grants.

Other tribal grant administrators also can explain the "ins" and "outs" of your tribal system with respect to grant writing. Grant administrators know who writes grants, who signs off on the budgets, who requests tribal council resolutions, who has statistical information and all of the other useful pieces of information you will need for the grant process. Each tribe is uniquely different in its protocol for the grant writing process. For some tribes, there is a central grant clearinghouse and each application must be reviewed by that office to eliminate duplication of effort and to assure that all of the grant guidelines have been set. Other tribes have very minimal regulatory processes so that anyone and everyone can write grants and no tribal office is designated to monitor that process. There are tribes that have grant writers on staff; they are the individuals who compose grants for specific departments. As you can see, the range of grant services from the tribes themselves is quite diverse.

It is important also to disarm the grant writing process by becoming a master of the jargon. Most of us have less than a clear understanding of what most proposals contain. The addition of "grant jargon" makes the entire process quite confusing. If you are uncertain as to the meaning of the words or terms, ask for more clarification. Some commonly used "jargon" terms are listed in a Glossary of Terms at the end of this chapter.

In addition, grants often contain many "concepts" that also may need to be defined. If you are uncertain as to the meaning of any part of the grant application, ask questions. Phone numbers and addresses for resource information usually are located within the grant application. As you are preparing your list of the questions that you would like to ask, keep in mind some of the following questions: What are allowable costs in the budget? What type of programs will be considered for funding? How detailed does program methodology need to be? Are indirect costs allowed?

As you write the grant proposal, make certain that you simplify your language and your life. Use factual information in your grant application and keep the information very simple and very basic. Keep your sentences short and direct. State ideas separately. In writing goals and objectives, make certain that you do not commit yourself to "too much," that is, more than can be realistically produced for the amount requested. Most grants are "ambitious for miracles," in other words, overly committed in terms of what is expected to be provided in a very short period. The goals and objectives need to be clear, doable and measurable. Ask these questions: How will I know that I have completed this objective? How will I know I have succeeded? What will be changed?

PROPOSAL DEVELOPMENT

Following is a suggested outline for the grant application process:

* **Identify the Problem that Needs Assistance**
* **Define a Program to Address the Problem**
* **Locate Grant Source**
* **Read Grant Source**
* **Read Grant Specifications**
* **Prepare Outline to Meet Grant Specifications**
* **Write Problem Statement and Documentation**
* **Outline Method for Solving Problem**
* **Write Goals and Objectives**
* **Write Evaluation**
* **Write Budget**

THE PROBLEM can be identified easily by putting together a community survey called a **needs assessment**. A needs assessment is a process by which you gather information about the problem you hope to address in your grant and about the existing resources and resource gaps in your community. The needs assessment can be as simple as calling a meeting with the service providers in your community and having them identify the programs that area available and the unmet needs of the community. Needs assessments can be much more involved and you may choose to develop a survey instrument. You may hold several meetings with service providers, community members, clients and other prominent people in your community. Overall you need to address issues of demographic information (reservation size and population), social, economic and medical concerns. You will need employment statistics and mental health data. In addition, the needs assessment will address the issues of duplication of services in your community. Duplication of services means that the same services are being provided by two or more agencies within your community. An example of this might be two counseling agencies in your community which provide the same services and compete for the same clients. In the

business world, this is known as business competition, but in the social services/child welfare world, this is called duplication of services. It is important that your grant does not duplicate services that are already being provided. Your program needs to provide new services and to enhance those services which already exist in the community.

THE PROGRAM that you design to address the problem you have identified through the needs assessment, needs to be outlined in the grant application. The question that you must answer is, "What are you going to do about the identified problem with the money and resources you are requesting?" You may want to implement a program that has been used in another jurisdiction or you may choose to develop a new program designed to address your needs. Look to other reservation communities to see if they have already designed a program to meet a need that is similar to yours. You may find information about existing programs from reading periodicals or through attending workshops or training events where a program has been featured. Other resources for information about programs are the Inter Tribal Council of Arizona, BIA Area Office, IHS Area Office and universities.

LOCATE A GRANT SOURCE by beginning to look through the grant and funding literature to locate a funding source that may meet your identified needs.

READ THE GRANT SPECIFICATIONS to make certain that you understand what the grant is asking you to do for the money you will be receiving. Read every piece of information concerning a particular grant announcement. I would suggest that you use a separate highlighting pen to emphasize areas that seem important or use a separate sheet of paper to list questions and important information. Once you have read the entire announcement, begin to develop an outline of your grant application. Most announcements give you detailed instructions about what must be in the application and in what order that information should be written. Other grant applications may include forms that are to be used to complete the application.

PREPARE AN OUTLINE of what you must complete for the grant application. The outline may look like this:

1. BRIEF OVERVIEW OF PROJECT (200 words, or less)
2. TABLE OF CONTENTS
3. STATEMENT OF NEEDS
4. PROBLEM STATEMENT
5. PROGRAM METHODOLOGY
6. GOALS / OBJECTIVES
7. TIME LINES
8. CULTURAL RELEVANCE
9. AGENCY'S ABILITY TO PROVIDE SERVICE
10. BUDGET NARRATIVE
11. ITEMIZED SERVICE BUDGET
12. LETTERS OF SUPPORT FOR THE PROJECT
13. CERTIFICATE OF INSURANCE
14. ORGANIZATIONAL STRUCTURE CHART

15. TRIBAL COUNCIL RESOLUTION
16. PROGRAM EVALUATION

Write the PROBLEM STATEMENT and use the documentation and statistical information that you gathered in your needs assessment. The problem statement is your opportunity to explain why it is important for the identified problem to be addressed. The problem statement also is an opportunity to discuss how the problem affects your community and the people who live there.

Write the STATEMENT OF PROGRAM METHODOLOGY so that it describes clearly your program activities. Make certain that you describe clearly the program activities, the order in which the activities are to occur, the program staffing and how that staff are to be selected, and the people you will be serving. Be certain that your methodology presents a reasonable number of activities that can be accomplished within the time allotted, with the amount requested.

Write PROGRAM GOALS AND OBJECTIVES that clearly and accurately reflect what you want to do in your program. The goal is the final purpose or aim of your program. The program objectives are measurable criteria by which you can judge the success of your program. The objectives should begin with phrases like, "To increase, to decrease, to reduce." Program objectives should tell who is going to be doing what, when they will do it, how much they will do, who they will do it to or with, and how it will be measured.

Write THE EVALUATION of the program so that you will be able to measure whether the program has achieved its stated objectives. The evaluation of the program is your measure of the program's success. It should involve the following issues: Was the program implemented in a way that was similar to your plan? Which components of the program were successful and which, unsuccessful? How did those issues affect the program? Determine who will be the program evaluator, internally and externally. Program evaluations usually occur on two scales, the first being completion of your stated program goals and second being its impact on The Problem in the way that you had anticipated.

In writing your PROPOSAL BUDGET, please be specific. Each funding source may provide a specific format for the development of your budget. You will need to submit your budget according to that format. Budgets usually include the following areas:

PERSONNEL: Salaries and wages, fringe benefits, consultant and contract services

NON-PERSONNEL COSTS: Space costs, rental, lease or purchase of equipment, consumable supplies, travel, telephone, other costs

Remember that all pieces of the grant application are interrelated and that each section is connected to all of the other sections. Each section of the grant will lead into the following section, *e.g.*, the objectives will follow the program methodology. Once you have developed these components, it will be natural to develop the evaluation component and the budget. The grant application should read like a story and each section should relate to the other sections.

INTERAGENCY COORDINATION

The purpose of a grant is to provide funding for a specific program that is to address a specific need in your community. However, in writing the grant and thinking of how it will "fit" together, it also is important to see a total community picture of needs.

As you are gathering information for the grant, you identify a variety of needs in your community in addition to the needs you are attempting to address. You also will identify community resources. It is clearly possible that you may find it appealing to work, and/or share resources and staff, with other community agencies. This is referred to as cooperation. The term seems foreign to many of us because each of our respective agencies fight to keep our programs and our clients, to "protect our turf." It is rare that we are encouraged to work with another agency for the common good of the community and its members. Typically issues of "turf" are emotionally charged and call for skill in discussion as each agency fights for possession of clients, programs and service units. It is important to remember that there are times when combined budgets and staffs can solve more community problems than several small independent programs. The duplication of services, in this context, continues to be a concern in funding grant proposals. Funding two different agencies to perform the same service is a waste of financial resources. It is common for social service agencies to find fault with the services provided by other agencies but if they attempt to remediate the problem by duplicating the services then they have created a more serious problem. When we find fault in another agency and the services they provide, it may be to our advantage to coordinate with that agency and, perhaps, provide joint in-service training in an effort to correct the problem, instead of starting our own agency to take over the service. Interagency coordination needs to be seen as a way to gain more services for the dollars and as a way to share staff expertise and knowledge for the benefit of the total community.

Another term that is foreign to many of us in the social services / child welfare area is that of interagency collaboration. The term 'interagency collaboration' refers to a process by which agencies work together in a partnership with each having an equal voice in that partnership. The term collaboration does not imply that one agency has the power to set policy for another or that there is to be a hierarchy in the relationship between the agencies. Collaboration indicates that policy and procedures are discussed and that all agencies have an equal voice in the decision making process. Certainly, interagency collaboration is an ideal goal in the relationship among the tribal, BIA and IHS agencies. It would be a much easier working relationship if the basis were collaborative effort and trust.

NEGOTIATION

If you have prepared the grant application properly, it will be easier for you to enter a contract negotiation session with a clear understanding of what is changeable, or not changeable, about your application. Contract negotiations generally involve representatives from the funding agency and the agency which has been awarded the grant. Each funding source dictates those negotiations. Each representative is there to gain clarification about the project and to define the program objectives as well as the budget line items. Negotiations can range from very friendly to extremely adversarial. Go into the negotiations with as much knowledge as you can, read the grant applications, know your objectives and know your budget limitations. Present yourself in a professional manner in the negotiations. Have your notes and questions ready for the session.

We have stated that often we commit ourselves to accomplish too much and ask for too few dollars realistically to complete the project. If there is to be a reduction in budget, make certain that there is a reduction in the expected outcome, if warranted. Above all, be alert to the possibility that a budget cut may jeopardize the entire project. Do not settle for less money than you need to operate. Negotiation is an acquired skill and the more you are involved with it, the better your skills will become. The end product of the negotiations is a signed contract. It will contain the dollar amount for which your program has been funded, grant guidelines, program objectives and signature pages for your department head and tribal representative.

MANAGEMENT

In the area of budgets and reports, it is important that you simplify the process as much as possible. As indicated earlier, it is important that you read the signed contract and develop an outline for yourself of the program objectives, time lines and expenditures. A helpful technique to ensure that you have not missed any information in the grant proposal and contract is to have a co-worker read the document and compare notes on the information that was read.

REPORTING

Outline your report deadlines on a wall chart and keep yourself as aware as possible of upcoming report and budget time lines. Clearly outline your budget expenditures from the grant application and develop a monthly expenditures sheet that will indicate the money you have to spend as well as the monies that you have expended already. It is much easier to monitor and manage budgets on a monthly basis than it is on an annual basis (see attached spread sheet). GRANT MONIES ARE DESIGNATED FOR SPECIFIC PURPOSES AND ARE NOT AVAILABLE FOR ANY OTHER PURPOSE WITHOUT A

CONTRACT AMENDMENT. GRANT MONIES ARE NOT A SOURCE OF GENERIC FUNDING FOR TRIBAL PROGRAMS. THEY ARE SPECIFICALLY DESIGNATED MONIES THAT ARE TO BE USED FOR THE SPECIFIC PURPOSE THAT HAS BEEN DEFINED IN THE GRANT. MISUSE OF GRANT MONIES OFTEN RESULTS IN HAVING THE TRIBE REIMBURSE THE FUNDING AGENCIES FOR THOSE FUNDS THAT WERE EXPENDED FOR NON-GRANT PURPOSES.

CONCLUSION

Grant funding can be a valuable resource for program development in Indian country. The key to using the resource lies in each tribe's interest in, and commitment to, training workers to understand and pursue the grant process.

OUTLINE
MANAGEMENT SKILLS: GRANTS, CONTRACTS

I. GRANT WRITING

Desired Outcome: Learners will improve their knowledge of the grant writing process.

Learned Competencies Leading to Desired Outcome:

1. Ability to identify effectively potential funding sources.
2. Ability to understand proposal requests.
3. Ability to develop a grant proposal, including elements of overview, problem identification, methodology, goals, objectives, budgets and background information.
4. Ability to identify and understand contract and grant specifications.

SKILLS:

INTRODUCTION

UNIT ONE: Funding Sources (federal, state, private)

UNIT TWO: Resources

UNIT THREE: Reading Grants

Funding Specifications

UNIT FOUR: Proposal Development

a. identify problem
b. define program
c. locate grant source
d. read grant specifications
e. prepare outline
f. write problem statement
g. method for solving problem
h. goals and objectives
i. evaluation
j. budget

UNIT FIVE: Contract and Grant Specification

a. time lines
b. grant jargon

GRANT WRITING (Cont'd)

VIGNETTES:

UNIT 1: FUNDING SOURCES

The director of social services for the tribe is in need of identifying some possible funding sources to build and staff a new youth home facility for the reservation..

The director has had little experience with grant writing and is uncertain as to where to begin to look for possible funding.

1. What possible funding sources might be available for the project?

2. Where would you begin looking for those funding sources?

GRANT WRITING (Cont'd)

VIGNETTES:

UNIT TWO: RESOURCES

The director of social services for the tribe is in need of identifying some possible funding sources to build and staff a new youth home facility for the reservation.

The director has had little experience with grant writing and is uncertain as to where to begin to look for possible funding.

In the attempt to locate funding sources the director has started to think of resources available on the local, state and federal level.

1. What resources can you list that might be available on the local, state and federal level?

2. What information might you ask from each of those resources?

VIGNETTES:

UNIT THREE: FUNDING SPECIFICATIONS AND READING GRANTS

The director of social services for the tribe is in need of identifying some possible funding sources to build and staff a new youth home facility for the reservation.

The director has had little experience with grant writing and is uncertain as to where to begin to look for the possible funding.

After some possible funding sources have been identified the director may research each of the possibilities to see if they have interest in the project. In reading through the grant specifications the director is unclear on the meaning of the guidelines.

1. As the director, what would you do next?

2. What are some ways that the director can simplify the process of identifying the funding sources and their grant specifications?

3. What are some ways of "reading" the grant specifications and simplifying the research process?

GRANT WRITING (Cont'd)

VIGNETTES:

UNIT FOUR: PROPOSAL DEVELOPMENT

The director of social services for the tribe is in need of identifying some possible funding sources to build and staff a new youth home facility for the reservation.

The director has had little experience with grant writing and is uncertain as to where to begin to look for possible funding.

In an effort to locate funding the director has started to look for resources on a local, state, and federal level.

After some possible resources have been identified the director must research each of the possibilities to see if they have interest in the project. In reading through the grant specifications the director is unclear as to the meaning of some of the guidelines.

As the director begins to develop the proposal it becomes clear that a plan for development is needed.

1. What might be a possible plan for the development?

2. What type of checklist might be used to assure that the proposal is an appropriate response to the grant specifications?

VIGNETTES:

UNIT FIVE: CONTRACT AND GRANT SPECIFICATIONS

The director of social services for the tribe is in need of identifying some possible funding sources to build and staff a new youth home facility for the reservation.

The director has had little experience with grant writing and is uncertain as to where to begin to look for possible funding.

In an effort to locate funding the director has started to look for resources on a local, state, and federal level.

After some possible resources have been identified the director must research each of the possibilities to see if they have interest in the project. In reading through the grant specifications the director is unclear as to the meaning of some of the guidelines.

As the director begins to develop the proposal it becomes clear that a plan for development is needed. In further reading of the grant specifications it also becomes clear that the grant calls for gant charts, time lines, a tribal resolution, letters of support, an itemized services budget and itemized indirect costs. The grant writer is overwhelmed! ! !

1 What might you do to assist the grant writer in identifying the additional documents needed for the grant?

2. Who might be additional resources for the needed documents?

3. What is your tribe's process by which these documents are obtained?

GRANT WRITING
PRE-POST TEST

1. Name 3 sources of funding.

2. A proposal summary explains the program goals and objectives..

   -------TRUE ------FALSE

3. A gant chart is a time table of events for a grant.

   ------TRUE ------FALSE

4. An organizational chart is not a necessary element of the proposal.

   ------TRUE ------FALSE

5. Name 3 line items that might be placed in the proposal budget.

SELF EVALUATION QUESTIONS: VALUES OF SUPERVISORS

1. Have you ever been in the same dilemma as this director and how did you or how might you have handled it?

2. Has a lack of knowledge in the funding / grant writing area caused a loss or lack of funding in your agency? How might it have been handled differently?

3. In your opinion who should fund tribal programs?

MANAGEMENT SKILLS: GRANTS, CONTRACTS (Cont'd)

II. INTERAGENCY COORDINATION

Desired Outcome: Learners will improve their knowledge of interagency coordination.

Learned Competencies Leading to Desired Outcome:

1. Ability to complete needs assessment.
2. Ability to complete agency service profile.
3. Ability to recognize "duplication" of service efforts.
4. Ability to provide coordinated services.

SKILLS:

INTRODUCTION

UNIT ONE: Needs assessment for services

UNIT TWO: Agency profiles

UNIT THREE: Defining "turf" in relation to grants

UNIT FOUR: Coordinated services

III. INTERAGENCY COLLABORATION

Desired Outcome: Learners will improve their knowledge of interagency collaboration.

Learned Competencies Leading to Desired Outcome:

1. Ability to complete needs assessment.
2. Ability to evaluate merits and shortcomings of collaboration.

SKILLS:

INTRODUCTION

UNIT ONE: Needs assessment for services and staff

UNIT TWO: Merits of collaboration

INTERAGENCY COORDINATION

PRE-POST TESTS

1. Community planning is an important part of grant writing.

-------TRUE -------FALSE

2. Duplication of service means

_____

_____

3. It is important to understand your agency's mission and goals.

-------TRUE -------FALSE

4. Coordinating services with other agencies is not a grant requirement.

-------TRUE -------FALSE

5. Territorial issues and ownership of the client issues can hamper grant funding.

-------TRUE -------FALSE

INTERAGENCY COORDINATION (Cont'd)

VIGNETTES:

UNIT ONE: NEEDS ASSESSMENT FOR SERVICES

In the process of gathering information for the grant the director of social services had spoken with several members of the community about the plan to build the new youth home.

When the funding came through the community began to voice concern about other unmet needs for children.

1. If the question were asked of you, what unmet needs does your community have?

2. Develop a list of people and organizations in your community who can help articulate your needs assessment.

3. List 5 questions that you might ask in your needs assessment survey.

4. How would you use this information in your grant proposal?

VIGNETTES:

UNIT TWO: AGENCY PROFILES

In collecting data for the grant, the director of social services put together information about the various agencies in the community which provided services to children. The intent of this collection of information was to demonstrate the community need for a new youth home facility.

Some of the agencies had information readily available and other organizations did not respond to the requests for information.

1. What information would you have collected for the agency profiles?

2. What would you have done to help complete the profiles of the community agencies that had not responded to the request for information?

3. Why is it important to know what services other agencies are providing or plan to provide?

INTERAGENCY COORDINATION (Cont'd)

VIGNETTES:

UNIT THREE: DEFINING "TURF" IN RELATION TO GRANTS

As the social services director was gathering agency profile information it became clear that two other agencies were concerned about the grant application for the new youth home.

When the announcement was made that the grant was to be funded the directors of these agencies became very vocal about their agency needs. One agency felt that the new youth home would be "taking" clients away from them. The other agency indicated that they had intended to apply for the same grant monies and were cut off by your application.

1. What is your plan of action?

2. What are common "turf" issues in your community?

3. What interagency coordination might have been done early on in the grant writing process that might have helped avoid this conflict?

INTERAGENCY COORDINATION (Cont'd)

VIGNETTES:

UNIT FOUR: COORDINATED SERVICES

In developing the plan for the staffing of the youth home the director requested money to purchase the following services:

Counselors
Psychologist
Nutritionist
House Parents
Art / Play Therapist
Maintenance Person
Special Education Teacher
Social Worker
Nurse
Cook
Drug / Alcohol Counselor

1. What other agencies in your community currently have staff with these credentials who might provide these services?

2. Develop a plan to coordinate these services with your community agencies

3. What does "duplication of services" mean and what problems might there be with several agencies providing the same services?

4. What is the value of the needs assessment?

INTERAGENCY COLLABORATION

PRE-POST TESTS

1. A needs assessment should provide information in the following areas:

---------- ----------

---------- ----------

2. Three reasons for working with other community agencies in the grant writing process are:

_____ _____

_____

3. The sharing of staff and resources can assist agencies in finding solutions for many common problems.

----------TRUE ----------FALSE

4. Problems in community collaboration might be:

_____

_____

_____

5. Collaboration means:

_____

_____

_____

SELF EVALUATION QUESTIONS: VALUES OF SUPERVISORS

INTERAGENCY COORDINATION

1. If you were having problems with the services delivered to your clients by another community agency how would you attempt to remedy the situation?

2. What would you do if you discovered that your agency was planning to provide the same services that another community agency was already providing?

3. A couple of the community agencies did not complete their agency profiles and the information was needed to complete the grant application. You discover that the grant writer made up the information to complete the profiles. What would you do?

4. In the needs assessment you notice that an agency has given statistics that you know to be false. What would you do?

5. In completing the community needs profile some very prominent members of the community had not been consulted. They have come to you after hearing that the proposal has been funded and are very clear that they do not support the plan. What will you do?

INTERAGENCY COLLABORATION

VIGNETTES:

UNIT ONE: NEEDS ASSESSMENT FOR SERVICES AND STAFF

In conducting the community needs assessment the director of social services discovers that the community mental health center is interested in working with social services in a collaborative agreement.

The mental health center proposes that a position be developed through a grant that would allow the mental health center to hire a children's therapists who would work out of the new youth home on a 25 hour a week basis. The other 15 hours of the week the therapist would work in the mental health center and would be given support from the mental health center staff.

This arrangement has not been attempted before by your agency.

1. What do you think of this exchange of services?

2. Can you think of ways that collaborative agreements with other agencies might enhance your services to children and families?

3. How might the needs assessment bring out the idea of interagency collaboration in your community? Are there agencies that you are currently working with on a collaborative basis?

INTERAGENCY COLLABORATION (Cont'd)

VIGNETTES:

UNIT TWO: MERITS OF COLLABORATION

In reviewing the idea of a collaborative agreement with another community agency the director makes a list of pro's and con's to the idea.

1. As the director what would be on your list of pro's and con's to the idea of interagency collaboration?

2. What about the idea of "shared resources." How might this be appealing to a funding source?

SELF EVALUATION QUESTIONS: VALUES OF SUPERVISORS

INTERAGENCY COLLABORATION

1. Do you have enough trust in other community agencies that you could feel safe in sharing staff positions or resources? Explain.

2. How do issues of "turf" and "client ownership" enter into your ability to work with other agencies?

3. What would you do if you discovered that the agency that you had been working with had misused "shared" equipment?

4. How would you develop a plan for staff and property supervision in a "shared" partnership with another agency? How would you feel about being a supervisor in that type of arrangement?

MANAGEMENT SKILLS: GRANTS, CONTRACTS (Cont'd)

IV. CONTRACT NEGOTIATIONS

Desired Outcome: Learners will improve their knowledge of the contract negotiation

Learned Competencies Leading to Desired Outcome:

1. Ability to understand the negotiation process.
2. Ability to negotiate a contract effectively.

SKILLS:

INTRODUCTION

UNIT ONE: Defining negotiations
Range and extent of the negotiation process

UNIT TWO: Programmatic and budgetary negotiations

UNIT THREE: Negotiation pitfalls
Knowing your budget
Knowing your program

CONTRACT NEGOTIATION

VIGNETTES:

UNIT ONE: DEFINING NEGOTIATIONS

The director of social services for the tribe has submitted a grant to the XYZ funding source and will be meeting with the funding source to discuss the application.

1. What information would you have available for that meeting?

2. What are the possible areas of discussion for that meeting?

CONTRACT NEGOTIATION

VIGNETTES:

UNIT TWO: PROGRAMMATIC AND BUDGETARY NEGOTIATIONS

The director of social services for the tribe is meeting with the XYZ funding agency to review the proposal.

The director has asked you to prepare a presentation on the program and budgetary requests of the proposal.

1. How would you begin your preparation?

2. What information would you want to emphasize in your presentation?

3. What tools or visual aids might you use to demonstrate your needs and requests?

CONTRACT NEGOTIATIONS

VIGNETTES:

UNIT THREE: NEGOTIATION PITFALLS

The director of social services for the tribe is to meet with the XYZ funding agency to discuss the recently submitted proposal.

The director has asked you to provide the budgetary portion of the presentation. The presentation is scheduled for the following day. At this time you have had limited involvement in the writing of the proposal and have not seen the budget

In the meeting with the funding agency you are asked to explain several line items that seem overly inflated. You are also asked to explain the salary line item and the proposed staffing pattern.

1. What information do you need to comply with the funding agency's request?

2. How do you feel about the task that has been delegated to you?

CONTRACT NEGOTIATIONS

SELF EVALUATION QUESTIONS:

1. Have you ever been delegated to a position in which you needed to explain an activity or action with little prior knowledge of the event? How did you feel? How did you react?

2. If you knew that some of the line items in a budget were over inflated and that this was done purposely how would you feel? How might you defend your agencie's grant proposal? What questions or feedback might you have for the staff member who wrote the grant?

3. What problems do you see might arise if staff who are unfamiliar with the grant proposal are asked to negotiate the contract with the funding agency?

4. The funding agency is willing to fund your proposal but with less money than you have asked. You believe that the budget was "bare bones" when submitted and you are concerned that you can not provide the services that you proposed with less money. Will you indicate this to the funding agency?

MANAGEMENT SKILLS: GRANTS, CONTRACTS (Cont'd)

V. CONTRACT MANAGEMENT

Desired Outcome: Learners will improve their knowledge of contract management.

Learned Competencies Leading to Desired Outcome:

1. Ability to manage contracts effectively.

2. a. contracted services
   b. service specifications
   c. time lines
   d. program goals and objectives
   e. budgetary guidelines

3. Ability to make appropriate extensions and modifications to the contract.

4. Ability to manage budgeting process.

SKILLS:

INTRODUCTION

UNIT ONE: Reading your contracts

UNIT TWO: Contracted services
- a. service specifications
- b times lines
- c. goals and objectives
- d. budget guidelines
- e. extentions and modifications

UNIT THREE: Budget management

CONTRACT MANAGEMENT
PRE-POST TEST

1. What are 3 issues that you may need to be attentive to in monitoring and managing contracts:

_____ _____

_____ _____

2. Service specifications are set up for the following reasons::

_____

_____

_____

3. When budget line items are unable to be met the grantee needs to notify the grant source immediately.

----------TRUE ----------FALSE

4. Grant monies are available sources of money that can be used for whatever the grantee needs.

----------TRUE ----------FALSE

5. Monies may have to be returned to the funding source if the grant goals and objectives are not met or if funds are used inappropriately.

----------TRUE ----------FALSE

CONTRACT MANAGEMENT

VIGNETTES:

UNIT ONE: READING CONTRACTS

The director of social services has received the grant contract to build and staff the youth home. The actual signed contract has arrived in the director's office and you have been called in to discuss the implementation of the contract.

You are vaguely familiar with the grant and have not yet read the final copy. You have been told that the implementation of the contract is to start immediately..

1. What is the first thing that you are going to do?

2. What are the key issues that you have about the contract and the implementation at this time?

3. How might you proceed to implement the contract?

CONTRACT MANAGEMENT

VIGNETTES:

UNIT TWO: CONTRACTED SERVICES

The director has given you the job of implementing the contract for the new youth home. Some other members of the community have voiced their opinions that the monies might better be used for other tribal needs. The director has even mentioned that it may not be possible to implement the entire plan during the first year of the program and that the monies allocated will not all be used.

1. Can the monies be used for other projects?

2. Where would you find information about using the monies for reasons other than stated in the grant application?

3. What could happen if the monies were reallocated to other needs?

CONTRACT MANAGEMENT

VIGNETTES:

UNIT THREE: BUDGET MANAGEMENT

You have been given the task of managing the budget for the project. The budget includes monies for the construction of a new youth home and for staffing the facility when it is completed.

The contract guidelines clearly outline a bid process for the building and for the furnishing of the youth home. The staffing plan for the facility is on a 12 month basis and includes food costs, salaries, mileage and contract services.

1. How will you begin to set up your budgets?

2. How will you monitor the monetary flow in the budget line items?

3. What budgetary plan might you develop to help you monitor the use of monies from the grant?

4. What system of reporting will be used with your funding source? Where might you find the answer to this question?

SELF EVALUATION QUESTIONS: VALUES OF SUPERVISORS

1. How might you feel if you were placed in a position of monitoring a program that you had little information about?

2. You are expecting a sight visit from the funding source and you know that you have not fulfilled the contract goals and objectives for the first quarter of the grant. What would you do?

3. You are asked to supervise the grant contract in the third quarter of the funding cycle and discover that no financial reports or program reports have been submitted to date. What would you do?

4. In reviewing the budgetary expenditures you notice that monies have been spent for items not authorized by the grant specifications. These monies were spent by the previous grant supervisor and amount to several thousand dollars. You are now responsible for the contract.....What would you do?

MANAGEMENT SKILLS: GRANTS, CONTRACTS (Cont'd)

VI. REPORTING

Desired Outcome: Learners will improve their knowledge of contract reporting.

Learned Competencies Leading to Desired Outcome:

1. Ability to read contracts.
2. Ability to interpret contract information.
3. Ability to identify report guidelines, outline service specifications, file financial reports, file written reports.

SKILLS:

INTRODUCTION

UNIT ONE: Reading contracts

UNIT TWO: Service specifications
Report guidelines
Written reports
Financial reports

REPORTING

VIGNETTES:

UNIT ONE: READING CONTRACTS

The director of social services has received the grant to build and staff a new youth home. The actual signed contract has arrived in the mail and has been sitting on the director's desk for a few days.

1. What is the first thing that the director should do with the grant contract?

2. What ideas might you have to assist in understanding the grant specifications and guidelines?.

3. Develop a check list of important points that need to be attended to in reference to the grant contract.

REPORTING

VIGNETTES:

UNIT TWO: SERVICE SPECIFICATIONS

The director of social services for the tribe has taken the contract to a subordinate to be reviewed and monitored. This staff person has limited experience with grants and is not certain about what needs to be done with the contract at this time..

1. How should the staff person begin to outline the service specifications of the grant?

2. What specific areas should the staff look for in the service specifications?

3. Where would specifications on reporting, budgets, and program goals and objectives be located?

REPORTING

PRE-POST TEST

1. It is important to read your contract and identify the projects' goals, objectives and reporting time lines.

----------TRUE ----------FALSE

2. Reporting guidelines are important for the following reasons:

---

3. Reimbursement of costs indicates that the grant monies are paid in a lump sum.

----------TRUE ----------FALSE

4. Cash advances do not have to be validated with receipts and budget accountability.

----------TRUE ----------FALSE

5. Reporting needs to be done regularly in order to assure regular cash flow to the program.

----------TRUE ----------FALSE

SELF EVALUATION QUESTIONS: VALUES OF SUPERVISORS

1. What priority level do you give the paperwork portion of your job?

2. Do you consider it necessary to adhere to deadlines?

3. Have you ever fallen behind in your reporting to funding agencies? Why or why not?

4. Who would you turn to if you had a question about filling out report forms?

5. If you had a report that was due to the funding source and you were unsure as to how to complete the form would you:

Do the best you could
Ignore the report
Call for assistance

GLOSSARY OF TERMS
MANAGEMENT SKILLS: GRANTS, CONTRACTS

BIA: Bureau of Indian Affairs

Budget: A portion of the grant proposal that clearly delineates costs to be met by the funding source and those to be provided by the applicant or other parties.

Catalog of Federal Domestic Assistance: A publication that lists sources of federal government aide.

Carry Through Monies (carry-over): Grant monies that have been allocated but not expended over the fiscal year. Some types of grant funding will allow these monies to be placed in the next fiscal year budget for use by the grantee.

Collaboration: To work together; to work or act jointly.

Coordination: To bring into common action, movement or condition.

Cost Reimbursement: Budget l[illegible]ng process by which the allocated monies are released by the funding source upon receipt of itemized expenditures.

Evaluation: A portion of the grant proposal that presents a plan for determining the degree to which objectives are met and methods are followed.

Formula Grants: Direct allocations of money to states according to various distribution formulas based on need.

Foundation: A. Donation appropriated to support a charitable institution. Generally the donation sets up a permanent fund of money for charitable giving. B. The organization established to manage and distribute the appropriated donations.

Foundation Directory: Collection of information about foundations located across the United States.

Future Funding: Describes a plan for continuation beyond the grant period and / or the availability of other resources necessary to implement the grant.

Goals: Broad general statement of what is to be accomplished by the proposed project.

Grant Specifications: Specific guidelines contained in the request for the proposal that indicate the who, what, where, when, why and how of the proposal.

IHS: Indian Health Service

Line Item Budget: A budget proposal that outlines all expenditures in detail.

Loans and Insurance: Direct and guaranteed loans; insurance to cover losses su[illegible]ed under specific conditions.

Methods: Describes the activities to be used to achieve the desired results.

Needs Assessment: A process which documents the needs to be met or problems to be solved by the proposed grant proposal.

Non-Grant Financial Aide: Direct payments (including conditional subsidies, retirement and pension plans).

Objectives: A part of the grant proposal that establishes the benefits of the funding in measurable terms.

Ownership of the Client: Term that implies that one agency has responsibility for the case planning of the client.

Problem Statement: A part of the grant proposal that documents the needs to be solved by the proposed funding.

Project Grants: Funding for specific projects or the delivery of services or products. These include research, planning, demonstration, training, construction, evaluation and direct services grants, as well as fellowships, scholarships, traineeships, and unsolicited contracts.

Sale, Exchange, Donations: Transfer and use of federal property and goods, including land, buildings, food, and drugs.

Special Services: Technical assistance and information, consultation, advice, training (conducted directly by a federal agency) and complaint investigation.

Summary: A part of the grant proposal that clearly and concisely summarizes the grant request.

Request for Proposals (RFP): The process by which funding agencies publicly announce their interest in receiving grant proposals for specific purposes. RFP's are generally announced in newspapers and other major publications.

Resolution: A document that indicates support on behalf of the Tribal Council for the proposed plan or project.

Turf: Claim on specific areas of service provision as the sole domain of specific community agencies.

MONTHLY
BUDGET DETAIL

Total Program EXPENSES	1 CURRENT BUDGET	2 CURRENT EXPENSES	3 YTD EXPENSES	1 - 2 OVER/UNDER BUDGET
I. PERSONNELL				
A. SALARIES, WAGES				
B. EMPLOYEE BENEFITS				
C. CONSULTANCIES, CONTRACT SERVICES				
II. NON -PERSONNEL				
A. SPACE COSTS				
B. EQUIPMENT LEASE				
C. EQUIPMENT PURCH				
D. SUPPLIES				
E. OFFICE EXPENSE				
F. TRAVEL				
G. TELEPHONE				
H. UTILITIES				
I. INSURANCE				
J. PROFESSIONAL SVC				
K. EMPLOYER TAXES				
TOTAL:				

	DESCRIPTION	Month: Amount	Month: Amount	Month: Amount	QTR TOTAL
	TOTAL				

	DESCRIPTION	QTR1 Amount	QTR2 Amount	QTR3 Amount	QTR4 Amount	YTD TOTAL
	TOTAL		179			

CHAPTER 5

MANAGEMENT

"Clearly we are living in troubled times. We all sense this and we all sense an urgency to begin moving against the destructive forces that are tearing our families, our society apart."

by:

Robert R. Lewis, MSW
Director of Health and Human Services
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Director of Social Services
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INTRODUCTION

Supervisors of Indian child welfare programs need to know and understand some principles and techniques of management. Most programs may be relatively small in structure when compared to large state or urban agencies, and the perception may be that management principles are more appropriate for large sophisticated organizational structures. As a matter of fact, the same methods of management are required for effective and efficient program operation. Even if the service is a one-person operation, this knowledge will be of some use. It can be used to structure and organize one's work. It is most important when the program reaches a point at which it needs to develop to the next stage in its progress toward more comprehensive services. A program always should be prepared to change and grow if it intends to meet the needs of a community.

The reality of being a supervisor in a tribal system is that one will be required to carry out tasks that one may not have anticipated. In this setting, one needs to be a generalist in carrying out duties. This means being able to use a variety of skills to perform the work of several positions. A new supervisor probably will not have all the skills but should be able to learn them through training or consultation with an experienced peer. Specialized duties that are limited only to certain, predictable tasks are not the norm for supervisory jobs in tribal child welfare programs. A supervisor usually finds him/herself involved in direct services as well as supervising the work of another person or several others. Additionally, a supervisor may have to perform administrative tasks. This is because, typically, a tribal child welfare program is a small organization so there may not be a need for having a full time administrative staff position, nor may there be financial means to support such a position. Tasks related to this position will be added to the duties of a supervisor. In a developing tribal service program, a supervisor may not realize she/he is undertaking administrative tasks because she/he is responding to program needs. Thus, even though the focus of this manual is supervision, it is expected that supervisors in Indian communities will have broader responsibilities than their counterparts in a large organization.

Although supervisory skills are essential to the daily program functions and activities, the supervisor needs to understand management and how it is distinct from supervision. Management has been seen as the art of accomplishing work through people. It involves determining purposes and goals for a program or organization and developing the tasks needed to accomplish those ends. This also means structuring and channeling all the functions of the program in a clear direction. Management will require certain technical skills and leadership ability. Management processes can be understood by looking at its basic components. Understanding these components will show how they are distinct from supervision. We will now look at these components and define what they involve.

BASIC COMPONENTS OF MANAGEMENT

A. Planning

It has been said that while making plans does not ensure success, not making plans may ensure failure. Planning is the first phase in the process for a program or service to accomplish its goals. Planning cannot stand by itself. It relies on the other components of management to bring about the desired activities. **Forecasting, or the prediction of future conditions**, is integral to planning and, while the future is uncertain and difficult to plan for, planning assists the manager in making the decisions which will determine what activities lead to the goals. Effective planning also must include the **consideration of alternative courses of action**. In the field of human services, the future is highly variable and plans must be dynamic, which is to say that alternative actions and options must be made a part of the planning. This type of planning, including contingencies or options, allows the manager to lay down a framework or foundation that will allow additions to the program in the event of expansion and change.

Change in human services, especially child welfare, where the body of knowledge is expanding daily, continues to place a significant demand on programs and, likewise, on the program managers. Having good choices and options aids the manager in responding to change and may serve to strengthen existing program functions. Planning, then, is integral to deciding or choosing what the program will do, who will do it, who will participate in it, and how it will be done. Time frames almost always are involved in planning and timeliness alone can make a plan successful, or the lack of it, ineffective. Time frames for decisions, activities, expenses and evaluations or assessments are vital to good planning practices. How many of us have realized too late that we should have planned ahead?

Good planning often is seen as a luxury and few of us in the field of human services have extra hours to commit to speculation of future events or to which way the political winds will blow. Yet, planning is crucial if managers are to avoid misdirected and ineffective implementation of the program of services. Planning sets the stage for the other components of management to be employed and for services to meet the needs of a changing community.

B. Budgeting

As with planning, budgeting involves forecasting or predicting what the future will be. Managers are called on to decide where funds will be used in order for a program to operate over a period of time. In dealing with unexpected costs, such as inflation or rising energy costs, managers must be able to control how funds are spent. For most human services, funds are based on some type of allocation, whether it is federal, tribal, state or local funds, in the form of a grant or contract. Funds usually are limited to the initial amount granted. Budget problems normally center on maintaining or not maintaining appropriate expenses.

Budgeting, to be effective must be comprehensive and should include all phases of the budget process: allocation, expenditure and documentation. For managers whose

assigned tasks include the goals of the program, budgeting has shown it can be an effective control in directing programs. Deciding how funds will be spent, how these resources will be allocated can influence readily the program's movement toward its goal. Budgeting also has grown in importance as funding agencies have intensified the demand for accountability of fund use by the service programs.

Good, effective budgeting relies heavily on competent reports which are based on accurate data. In many tribal financial systems, cost accounting principles have been instituted to provide program managers with reports which reflect actual costs for each area of service. Budget management requires that managers become familiar with the information in these reports, regularly analyze them, identify mistakes or omissions contained therein and have corrections made as soon as possible. Budget control is not possible without accurate reports; neither is budgeting effective without timely reports. Managers with budget control responsibilities should consider maintaining a system of documentation that will aid them in keeping track of expenses if, or when, other financial reports are absent, inaccurate or delayed.

Managers of child welfare programs often face the problem of insufficient funds to cover all program costs. Many Indian child welfare programs use federal funds that may carry explicit instructions on how to spend the funds. Additionally, most communities and agencies have been forced, due to limited resources, to combine funds from several sources in order to provide an adequate level of services to its clients. Under these circumstances, budgeting and budget control take on a vital role in maintaining program service and in enabling the program to reach its stated goals. It is not uncommon for Indian child welfare programs to have their budgets reduced during a multi-year project. Since most child welfare program budgets support primarily staff and related costs, managers often are faced with reductions in staff due to budget cuts. Another area of budget control has been the contract allocations for child welfare placements *via* the "638" contract process administered by the Bureau of Indian Affairs.[1] Managers of tribal social services programs which contract for placement services are confronted with an usually fixed amount of funds for meeting all the needs of their community. Rising costs for residential care, including rising foster care rates, coupled with allocations that may not reflect adjustments for actual expenses from previous years, demand that managers effectively control the budget expenses and constantly seek out alternative resources that will have some impact on these services.

Budgeting has as its main concern **control of funds and expenses**, but additionally, budgeting has a primary role in the activities of the program through **allocations of resources** with which to get the job done. Balancing needs of the community against the accessible resources will continue to be the focus of the budgeting process.

---

[1] P.L. 93-638, *The Indian Self-Determination and Education Assistance Act*, January 4, 1975.

C. Organizing

The challenge presented to managers is how to bring order to the way in which the goals and objectives of the program are reached. Order is the ideal end product of organizing, but like other components of management, organizing is dependent on the effective practice of planning and budgeting. Organizing has two major components: the **coordination of activities** and the **delegation of responsibilities**. These functions, also, are integral parts of supervision which both program managers and child welfare supervisors often share. Organizing always has been linked to planning. The first phase of organizing is the careful definition of job responsibilities, in a word, planning, so that those responsibilities described can be carried out. Coordination and delegation will not be successful if staff responsibilities are not defined or if job descriptions are impossible to accomplish.

Coordination of activities remains a crucial factor in the provision of human services including Indian child welfare. Coordination must be utilized in all areas, intradepartmentally, interdepartmentally and with all other, unrelated, agencies. All, including the smaller programs employing only one service worker, are designed to provide several services simultaneously usually on a continuous basis. With several activities happening at once, coordination is the process which brings the full force of different services to the clients. Collaborative effort or the close working relationship of service providers often will render services much more comprehensively than is possible by a single worker. Also, limitations of most programs require reliance and dependence on other services to meet related needs of shared clients. Indian child welfare supervisors and managers are very aware that the client's unmet needs affect his/her participation in their program services and these unmet needs may preclude successful completion of the case plan. While coordination is essential, not all workers fully understand coordination and, therefore, may not be able to establish the relationships necessary for effective coordination. Program managers and supervisors share the important responsibility of assisting staff to develop capabilities to coordinate with other programs and service providers. (See also Chapter 3, "Case Managment.")

By organizing, the manager attempts to use all staff including him/herself in the most effective and efficient manner possible. If supervisors or managers attempted to accomplish tasks without assistance and reliance on staff, several problems would develop. For example, generally, when delegation of responsibility is not used, managers will experience a work overload and related burnout; also, the staff may develop feelings of incompetence and alienation from being left out of the process. Almost all of us who have been in the supervisory role have had the feeling at one time or another that it would be quicker, easier, or both, to do the job ourselves. Such a short term solution will work against the program in the long run because that solution also is subject to the same burnout and staff alienation. Delegation of responsibilities to the appropriate staff distributes the work load and increases the individual level of competency. As with coordination, the supervisor must assess the staff's capability and assist them as necessary to develop abilities to accept and handle the delegation of responsibilities.

Organizing is a function of management that is shared by managers and supervisors. Management requires that programs and their actitivies be organized to produce a coherent order to service delivery. Supervisors must organize in order that staff are used effectively and capabilities are expanded whenever possible. Effective organization will be dynamic, capable of responding to changes in the environment and providing the ordered framework for implementation of services to meet those changing needs.

D. Staffing

People, and the skills that they possess, have the most critical impact on the delivery of services and the success of human services programs. The placement of individuals into jobs has a direct impact on the accomplishment of program goals and objectives. Most supervisors start with an established group of workers to whom is given the responsibility to work with what they have. Managers, however, are often called upon to hire staff for specific, defined jobs. Critical to this call is finding the right person for the right job while at the same time incorporating broader community or agency mandates.

The use of local, indigenous persons in Indian child welfare is a widely accepted practice in staffing; it provides for culturally sensitive and relevant practice. While selection for a staff vacancy depends on the manager's clear understanding of job responsibilities, it also may be equally important to understand what personal skills potential staff may have. Additionally, recruitment efforts, an integral part of staffing, may be shaped by the development and use of local community members as potential staff.

Staffing must be viewed as a comprehensive task that is often shared by both the manager and supervisor. Recruitment, selection, training and advancement are elements of staffing. Supervisors should be involved with training and advancement if not with all other elements. Termination, a negative activity, is also part of staffing because the manager and supervisor must be able to identify ineffective staff and, if corrective action fails, must be able to clear the way to hire new staff.

Through the process of organizing, the manager has developed well defined job responsibilities and identified the skills necessary for the specific jobs. Selection requires that the manager or supervisor have a clear idea of these responsibilities and skills. Orientation and initial direction for new staff are part of selection since an understanding of the related responsibilities must be provided for new staff.

Training and advancement are the ongoing elements within staffing and often are shared by the manager and supervisor. Training is a positive motivator for many staff and is essential in developing the capacity and capabilities of staff. Training is a tool by which tribal programs can bring about the development of indigenous staff for more responsible, demanding positions. Capacity building is productive for staff and program alike, and training is one of the most appropriate systems to achieve this end. As previously discussed in the section on organizing, staff must be ready to accept delegation of responsibility. Training should address the need for workers to be skilled in more than one job task, and therefore, cross training will need to be instituted in order that continuity of services is not disrupted when delegation occurs. The following vignette illustrates how one situational

conflict was resolved and the insights gained were used in designing training methods to respond to future problem situations:

> In a meeting to resolve a conflict between two child welfare workers, their supervisors pointed out a difference in each of the workers' assessment of progress in the case plan. After sharing their individual perspectives, both workers were better able to see strengths of the client and had an appreciation for the other's point of view. The case plan was modified incorporating changes from both workers and this conflict was resolved.
>
> While the supervisors could see the ideal of being able to cross train all child welfare workers, they realized time and work loads were prohibitive. They were able to identify several problem areas: workers not being aware of the other available services and workers lacking insight into other program workers' point of view when preparing case plans.
>
> Based on this conflict resolution, and desire to coordinate services better, the supervisors designed an inservice training for human service workers. The training was seen as an experimental learning opportunity for workers to develop an insight into case planning and other service programs and their expectations. The training design had three phases.
>
> During the initial phase, the supervisors and staff presented their program expectations and services which included the distribution of service outlines and organizational charts.
>
> As part of the second phase, the supervisors had prepared hypothetical case histories that presented common problems and dilemmas but were specific to certain service areas or client groups, such as juvenile delinquency and alcoholism. During the second part of the training, staff were divided into small groups composed of workers from similar areas. Each of the groups was given a case history for which to prepare a case plan. The case history given to each group was selected so that the service need was outside its normal work area. The instructions asked the members of each group to use their professional experience, along with the information shared in the first phase of the training, to prepare a case plan.
>
> The third phase of training brought all the small groups together to present their case plans to the large group. Staff from the different areas were then able to provide feedback and clarification on the case plans and possible alternatives in providing services.

Agencies and tribal programs generally have their own rules and guidelines for promotion of staff. Often small programs and projects do not have budget support or staff linkages which would provide for normal promotional movement. Managers and supervisors may have to be creative in the use of new job descriptions, in defining broader areas of responsibility and in assigning greater autonomy when attempting to promote staff in programs with the aforementioned limitations. Staff should be consulted and assessed for ideas of what is a desired promotion benefit, whether it be a salary increase, new job activity or more autonomy.

Management is a process of getting work done through people. Staffing is people. Hiring the right people, developing their skills and capacity through training, promoting them to higher levels of responsibility are the marks of effective, efficient staffing management. In the area of Indian child welfare, as in many areas of human service, the personal his-

tory and experience of the staff person, as well as his/her cultural sensitivity and relevance, play an important part in the effective delivery of the service.

E. Directing

This component of management is the ongoing, day to day operation of most programs. As part of his/her responsibility for direction, the manager must be accountable to both staff and the community, which includes those served by the program services. The professional and personal skills of the manager must be used to establish the rapport with staff and the organizational environment where direction can be applied. Professional leadership, motivation, communication and evaluation / assessment are important parts of directing programs toward the achievement of goals and objectives. Direction must be demonstrated in an easily recognized style or a systematic set of actions that will enable staff to follow a clear example, rather than a set of orders that are not recognized or do not lead to the achievement of the goals. Managers must be careful not to direct by order or authority alone, but to provide examples, in essence to lead from the front.

Leadership, with its different styles and systems, is the subject of volumes of research and discussion. What has been commonly accepted is that the leadership style used must be compatible with the organization and the personality of the manager. Many managers have discovered that Indian child welfare programs with their varied staffing patterns and project designs require the manager to be eclectic in the selection of leadership styles. Humanistic leadership, consensus decision-making processes and a therapeutic use of self are common styles found in effective management of Indian child welfare programs. Authoritarian and autocratic styles have limited application in most programs, and usually are reserved for concrete, regulation-directed decisions.

Communication becomes increasingly important when managers attempt to provide examples and to establish consensus with staff. Their expectations for the performance of job activities and the coordination of efforts by staff must be communicated clearly. These expectations must be stated in directions which are clear and understandable, capable of being carried out by staff involved. Managers who are effective communicators realize that meetings and conferences are much more likely to produce the desired results if all participants clearly understand the content of the messages. Feedback and clarification mechanisms must be incorporated into the process to allow misunderstandings to be identified and corrected before problems arise.

Motivation continues to be a subject that managers struggle to understand and practice. Stimulation of staff to achieve the program's goals and objectives can be elusive and frustrating when staff are not motivated. The study of human behavior prepares the manager to identify wants and needs of staff but she/he recognizes there are many other factors in the work environment which may contribute to staff satisfaction. Engaging staff in the decision making process, empowering staff to perform job activities and allowing staff appropriate levels of autonomy generally are accepted tools of motivation.

Program evaluation and assessment are part of directing. This process provides for determination of changes in program management. Most funding carries with it the requirement of evaluation and assessment; also, managers routinely provide reports on program functioning. Directing must incorporate the results of these assessments and alter methods and processes to provide new direction to the program. Additionally, program achievements should be shared with staff and participants to motivate and encourage further progress.

The attitude of the supervisor or manager plays an important role in the delivery of services. This attitude about employees will have a great influence on how the workers perform their duties and responsibilities. A supervisor should assess oneself and become aware of how she/he carries out her/his role as supervisor, manager. A supervisor or manager has an important role of being a leader and this role needs to be discussed.

A. Leadership

We have discussed leadership and it should be understood that leading is not the same as managing. Leadership is a quality of management; it is a key element in the success of a management style. Management involves performing tasks of the process. The basic aim of management is to get work done through other people.

It is crucial that leadership be effective. We have stated before, a good leader must have a sense of direction for the program and she/he must be able to communicate that direction in clear terms. First, there must be established by the governing entity of the agency, whether it is a tribal council or a board of directors, a sanctified or approved area of concern and work for the program. From this base, there must be defined a purpose or mission for the organization that the manager understands or has helped define. In tribal organizations, this is a very important task and the head of the child welfare service must establish a clear understanding and agreement with the governing authority. In some situations, there is no such statement or it has been defined by someone who is not involved in the service program, who does not have a full understanding of all the considerations involved in performing the services or who does not understand the social problems confronting the agency. Without this basic purpose, it is difficult to establish direction and lead a program or service agency.

We have discussed the essential components of leadership: having a direction and a goal for followers. An effective leader must have skills to bring people along in a course of action. We have discussed the differences between management and leadership and they are not the same. Management can be defined further, and contrasted with leadership, as, "A process, mental and physical, whereby subordinates are brought to execute proscribed and formal duties to accomplish certain objectives. Leadership, in contrast, is a process whereby one person exerts social influence over the members of a group. A leader, then is a person with power over others who exercises this power for the purpose of influencing their behavior" (W.G. Bennis, as quoted in Filley, et al. p. 211).

B. Styles of Leadership

There is much literature which analyzes leadership from various approaches. What seems to be common about leadership is that it varies according to the personality of the leader; this relates to certain basic styles of leadership that have been recognized which can be discussed and used for reference in determining one's approach to leading others.

The first style can be called autocratic, or authoritarian. Control is centered in one person who has total authority and makes all the important decisions. Control over subordinates is accomplished by subtle threat of punishment or criticism coupled with use of rewards for those who comply. The manager in this situation can determine policy unilaterally and structure the work according to his wishes. The decisions are totally dependent on the knowledge and experience of this leader with little, if any, involvement from other staff members. Such a leader is found, characteristically, in the traditional system. As an ideal, the traditional system is efficient since decisions and actions are dependent on one person, but it ignores the possible contributions from staff of the organization; it stifles creativity and produces dependent, passive employees.

A different approach is one that is democratic in principle and allows employees to participate in decision making. This participation promotes cooperation of staff so that they will be more supportive of decisions and the actions that follow. The leader is still the final authority, but he recognizes the abilities of subordinates. This style can be achieved to varying degrees of success depending on how real is the involvement between the leader and the workers; this is dependent on the sincerity of the leader in his relationship with them.

A third style has been termed *laissez-faire*, and does not depend on a leader to motivate workers as they are expected to motivate themselves. They are given a goal and are expected to achieve it using their own creativity and energy. This encourages independence and cooperative group work, but can also result in lack of direction.

A leader needs to recognize, and have a sense of, a management style. One style of management depends on the individual personality, but awareness of self in relation to a style should be tempered by the needs and characteristics of a particular situation. There is no one best way to lead when considering an approach because style must be determined within the context of given situations in their variety, including one's own temperament. All styles can be successful in achieving some objectives, but accomplishment of the functional tasks of an organization is not the only end that a leader should seek. Since the leader is a social influence, there should be consideration for accomplishment of work in a manner that is mutually satisfying to the total organization. This assures continuation of a program that will be successful and effective.

What we have discussed about leadership are different ways to motivate people to accomplish the purposes and tasks of an agency or individual program. Each style of leadership represents ways to motivate people and ranges from positive to negative modes. Whatever the approach, the leader must carry out essential tasks of management which, in summary, are to plan ways and means of accomplishing mission or purpose, obtaining staff, and organizing tasks by designing program structure to provide expertise, supervision, evaluation and discipline.

ORGANIZATION

Organization is concerned with ways to design formal structures for delivering products or services. This involves decisions on how functions or work activities of an organization shall be divided in some systematic form. These decisions are based on the purpose, broad goals and strategies of the organization. Some type of structure is needed to carry out the purposes and goals of an organization, such as a service agency and its functions.

In designing a structure, decisions need to be made on the division of tasks and responsibilities. This is done by creating sub-units which are related to some logical premise. Program services may be divided according to the type of service, such as child welfare, financial assistance, or clinical counseling. A broader division of tasks may be based on a particular service population, such as the elderly, the youth, or the handicapped. So decisions about structure are important because they influence how services will be delivered. Always the primary reason for a human services organization is to provide and deliver services.

Although the hierarchical structure characteristically is perceived as a rigid bureaucracy, it can be adapted so that it is more flexible. This is the most common structure used to design service organizations. There are other ways to design structures and these can be considered. However, some understanding of organizational theory is needed before innovative thought can take place.

A. Theories

The traditional theory is based on the concepts of Max Weber, who devised what he considered to be an **efficient organizational model.** It was a move toward rationality and predictability in organizational operations. The essential characteristics of this model comprise six major components: (1) Specific division of labor; (2) Hierarchy; (3) Centralization; and (4) Formalization. Additionally, he concludes: (5) Employment constitutes a career; and (6) Hiring and promotion are based on merit. This model may be described as a **bureaucracy.** Bureaucracy can minimize or regulate the influence of any one individual. It also is a means by which individuals are made to conform to organizational needs. Structure is the setting in which power is exercised, decisions are made and actions carried out (Macht & Ashford, p. 227). Although designed for economic conditions at the turn of the 19th century, this model is adaptable and survives; it is an efficient structure. The essence of this model is specialization of work and the ideal is that all employees perform regular, specialized tasks. Each task is related to goals of the program. In practice, this ideal is more readily carried out in large organizations, but in small organizations there probably is more flexibility because there is not enough work in any particular specialty to absorb all of one person's time.

The strength of this model is the unity of effort that is imposed by the structure. All employees are accountable to a supervisor through the chain of command so that there is

definite control of purpose from the top down. Communication goes one way from the top down in the ideal organization. There can be response but it is filtered upward through the channels of the chain of command. Thus, only key authorities make operational and policy decisions. The advantages of this highly structured model may not be suited to a human service agency. Professional social workers feel responsible, not only to the organization, but to the people they serve and to their profession. Adaptations need to be made in consideration of the fact that bureaucracy was designed for an industrial enterprise whose purpose was to produce uniform products. This is a brief outline of a traditional structure which is widely used by business and government. In fact, most tribal organizations are based on this structure.

The second major theory that relates to management and organization is known as the **human relations approach.** It is characterized by a belief that workers have motivations that go beyond economic considerations. It reflects the perception that people have need for growth and independence. This approach is contrasted with the classic, scientific management of bureaucracy which is characterized by passive employees who have minimal control over their work. The ideal of the human relations theory is to build on the worker's strengths and motivations. This approach understands the existence of informal structures and relationships within an organization and that managers can learn to increase cooperation by the skillful use of leadership.

Douglas McGregor has developed a human relations model that describes managerial behavior that can be based on two assumptions about people. He called these assumptions Theory X and Theory Y.

In Theory X, it is assumed that most employees dislike work and will avoid it, if possible. Therefore, people must be motivated by threats of punishment in order to perform; this requires close supervision. It also assumes that most people want to be directed and not have responsibility; the primary motivation is security.

The highlights of Theory Y are that people are capable of self direction and self control when they are committed to organizational objectives. People will respond to rewards and recognition. It is also assumed that people can learn to accept and seek responsibility, that many of them are creative in their work.

Managers who follow the Theory X assumption must control and supervise employees closely; there is little creativity and initiative on the part of workers in the performance of their jobs. On the other hand, a Theory Y manager can organize work so that there is opportunity for employees to be creative, self directed and responsible in their work (Drucker, pp. 231-2).

Designing an organization based on the human relations theory is not simple since it is based on the ideas of independence and democratic involvement of employees. Decision making power is not limited to a few authorities and all staff must participate in setting objectives and the means for evaluating their program. There is less structure to rely on so that individuals must be confident and able to function without close direction. This theory assumes most workers must be taught to function this way, the idea being that

this counters the influence of the traditional structure which still is very strong. Other notable characteristics of this approach are its emphasis on teamwork and development of voluntary cooperation, reliance on voluntary assumption of responsibility and jobs that consist of broader and varied individual duties rather than specialization. Workers are accountable to peers rather than supervisors. There is an emphasis on group decision making and the use of informal norms rather than rules and policies to guide and coordinate efforts.

Developing organizational structures that reflect the human relations theory involves consideration of workers. A structure for this approach would encourage use of the abilities of the workers through their strengths. It promotes worker involvement in problem solving and decision making of the organization. Rather than a top-down authoritarian approach in which control and direction emanate downward with limited communication, an alternative structure will involve means for group problem solving and interaction between units. This structure would encourage teamwork and voluntary cooperation among all levels and across lines. This does not necessarily require major changes in the traditional bureaucratic structure and may involve only additional elements that provide for more interaction.

Another approach is called **human resources.** It is based on the belief that people have need for acceptance, status and recognition. They also want opportunities to develop and apply all their abilities and gain satisfaction from achieving difficult, worthwhile objectives. Using this approach would provide for the encouragement of contributions from employees rather than controlling poor performance. Standards and objectives for performance are established jointly between supervisors and subordinates. Workers are encouraged to participate in important matters and broaden their self direction and control. Simply put, the manager must view people as another resource for the organization and allow them to use all their abilities and skills to achieve the ends of the organization. The human potential of the organization must be tapped and put to work. This contrasts with traditional approaches which "do not focus on people as a resource, but as problems, procedures, and costs" (Drucker, p. 308).

We have discussed some aspects of management theory and organizational structures. Theories never are absolute and will be subject to challenge. They will, however, allow practical consideration of them in application. Any professional activity or course of action begins with a theoretical base.

B. Structures

For a human service agency, a manager probably will develop and design an organization that has some aspects from all the approaches; this is referred to as an eclectic approach. This need for eclecticism is the reason why a person who has management responsibilities should know and understand some theory realizing at the same time that theory only guides a manager who must design a structure and organize functions according to local considerations.

A supervisor in a small agency or program should, at least, be aware of some basic managerial and organizational principles such as we have discussed. The intent of this information is to provide a basis from which to look at a program and its structure, to see if it can be improved so that services can be delivered most effectively and efficiently. Reaching these goals requires competence of the individual workers but program management and structure also contribute to good services and their delivery. Added to their value in structuring program design, the theories of management show that workers can be motivated to be productive and do the best possible work within the limits of their abilities and training if directed in a supportive manner using ideas from theories.

VALUES AND ETHICS

Values and ethics are inherent components of service professions and, historically, have given meaning and direction to the practice of Indian child welfare. Values are the beliefs of how people and society should be if the community and its members were to benefit mutually. Ethics are the principles that define the rules of conduct for a profession and its members. Indian child welfare supervisors must face daily the complex task of trying to understand clients' problems without judging them and without allowing their personal values to interfere with assistance.

Before one can examine current or modern values of Indian child welfare supervision, one must understand the history and development of Indian child welfare practice. Traditional child rearing practices should be identified; how support was provided by the extended family and tribal customs should be described as well. Additionally, the historical perspective of how parenting practices and customs changed with the loss of traditional societies and cultures must be integrated with the current assessment of Indian child welfare practice. There exists considerable evidence that insensitive, value-laden child welfare practice has contributed to the unethical treatment of Indian children and this practice has had far reaching effects on individuals, Indian families and communities.

Given the number of tribes and diversity of customs, it is not advisable to view Indian values as uniform or universal. However, there are some values that are accepted as generally applicable to most Indian tribes and communities. These generalizations are useful in understanding Indian child welfare practice; they are: (1) children need nurturance and protection; (2) parents have responsibility for their children's needs; (3) children are valued by the family and tribe; (4) the extended family shares responsibility for child rearing; and (5) it is important to show respect and cooperation within the family and the community. At the same time, most supervisors are trained in the practice of basic social work values which include: (1) all people have the right of access to needed resources; (2) acceptance of worth and dignity of all people; (3) belief in the uniqueness of individuals; (4) belief in self-determination of clients; and (5) rights of client information to be held confidential. Values must be used to make choices and establish preferences or priorities in the practice of Indian child welfare, but which values are used becomes a critical decision. Conflicts between community values and professional values can pose

dilemmas for supervisors as well as challenges for managers when promoting program standards. Developing culturally sensitive practice and program standards will require that community values be fully integrated and that workers be trained and supported in the application of this practice. For example, many child welfare workers are trained to place the highest value on the "best interest of the child" in the practice of child welfare services. Prior to the passage of the Indian Child Welfare Act of 1978 (PL95-608), this value invoked in Indian communities resulted in the removal of large numbers of Indian children from their families to foster homes and institutions. The percentage of Indian children placed out of their homes was disproportionate to the percentage of all other children, at times five to ten times greater. The passage of ICWA provided for a "new" value, that of preserving the stability of Indian families; it produced a positive shift in the practice of Indian child welfare. It is now incumbent on child welfare workers to incorporate the value of the child's best interest in conjunction with the value of family preservation in the provision of services and in the decision as to where a child should reside.

It has become evident that purely professional values may not serve the best interests of Indian families unless revised or adjusted to meet the needs of their specific culture and community. Professional ethics are based on professionally accepted values, which are used to establish the basis for rules of professional conduct. Both the National Association of Social Workers (NASW) and the Child Welfare League of America (CWLA) have at different times published codes of ethics. These codes are both general and specific to different social work or child welfare practices. However, these codes may not serve the supervisor or manager of an Indian child welfare program because they may tend to preserve the *status quo* of existing practice, thereby not addressing the emerging values and practice of community based child welfare. Many Indian programs and communities have taken the responsibility to develop specific tools and techniques for their specific client group or have adapted practices learned through the assumption of child welfare programs from the Bureau of Indian Affairs (BIA). This is not to say that standards for programs and practice are not necessary but rather to suggest that standards must be based on identifiable community values, compatible with child welfare practice that supports the Indian family, tribe and community. Ethics are important to supervisors and managers of Indian child welfare programs if they enable the worker to become integrated into the community. Ethics of honesty, reliability, respect, and responsibility generally are accepted as highly desirable. Concern, acceptance and non-discrimination can be considered appropriate ethics when practiced with the commitment toward ensuring that all people can benefit. Ethics must emphasize the preference for the community perspective, allowing community values to direct the rules for practice. Good intentions are not good enough; they must be tempered by knowledge and matched by capability (Green, 1982).

The movement of Indian child welfare practice away from the federal model, which controlled all aspects of Indian life in accordance with the value system of the dominant society, toward a child welfare system controlled by and based on Indian values, is not yet complete. Changes and adaptations of theories, techniques and ethics are still necessary, requiring the supervisor and manager to study and reassess even the most basic concepts.

Indian families, for the most part, always have had the task of integrating two different value systems that are often in conflict. It becomes increasingly important for the practitioner to identify the strengths, values and ethics in the specific culture in which he will be employed, and to reduce the conflict produced by ill informed or culturally insensitive practice.

Each Indian community presents a complex blend of cultural values, personality traits, personal histories, social organization and various levels of acculturation. Ethics must be derived from ongoing, relevant analyses of these factors which then are used to form the foundation for Indian child welfare practice based on those cultural values and knowledge. Central to the value of Indian child welfare practice is the direct relationship between the well-being of children and the future well-being of Indian tribes and communities. "There is no resource that is more vital to the continual existence and integrity of Indian tribes than their children..." (ICWA).

MANAGEMENT CONSIDERATIONS IN TRIBAL ORGANIZATIONS

This section will describe organizational management situations with a particular emphasis on the tribal organization since this is where child welfare service development has been centered. However, human service workers also should be more aware of the role and importance of services provided by the urban Indian center which is a neglected element of the Indian human service network.

A. Tribal Organizations

The operation of any program in a tribal government is affected by the nature of the tribal organization of which that program is a part. If a tribal system is politicized and its administrators are required to function with politics as a major consideration, management practice will be handicapped. In contrast, in a situation in which political interference with program operation is minimal, a manager is free to install systems and to use methods that will be successful in accomplishing the purpose of the program(s). When we speak of politics, we refer to an attitude and practice that has as its primary interest the maintenance of power and status of a particular entity. When this is a primary motive for action, it affects the whole organization.

In every government organization, there is an element of politics to some degree, but as long as there is some latitude for management within its areas of responsibility, program development can be creative and innovative; it is free to have a primary purpose of service. Too often, in tribal situations the *status quo* is accepted and we tend to follow established patterns of bureaucratic structure and processes.

It is possible to create some latitude for a program by producing successful results and this has been proved in practice. Political leadership is most concerned with results and will support accomplishments that enhance the status of the total organization. So it is important for a program to gain the confidence of higher authorities by operating successfully. This is the basis of a strategy that will allow a program or unit to develop and gain resources that are available within a tribal structure.

Although internal political considerations may be a concern for a manager within a tribal structure, it is important also to have the confidence of the community at large.

It is difficult to gain the support of the community for child welfare programs because these programs intervene in the lives of individuals and families. Too often, child welfare programs are noted only for removal of children from their families for placement in substitute situations. A program will have greater public confidence if it has a comprehensive service program which offers a range of interventions that make removal of children only a last resort. Another important attribute for a program is to have a commitment to service that is reflected in the attitude of all its staff. All staff, professional and para-professional, will reflect the ideals and motivation that its leadership promotes. Therefore, it is imperative that management personnel be apolitical and placed in their positions because of their ability, skill and expertise, not because of their political ties.

To gain respect as a professional service organization, that organization must develop a record of effective service that benefits people. An effective program or service is one that produces results through some type of systematic process. In order to be effective, an organization must have a systematic approach to doing its work and have its services delivered with knowledge and skill. This means that all staff must know what they are doing; they must have some structured training for their work. Trained staff coupled with consistent supervision and leadership are important elements for the strong program that is looked upon as a beneficial resource in the community.

Another important consideration for a tribal service is that it is community based. This means that it is a function of a community government and, therefore, is under local control and direction. Tribal governments have worked to become "self-determined" and this means being self-reliant. One aspect of this attitude is that there must be a feeling that tribal government has direction and control over its programs. Employees should feel a sense of loyalty and pride in the organization that employs them; they should feel that they are contributing to the general well being of the community by their service. This means they have a sense of mission and confidence in their ability to carry out this responsibility. This is the ideal organizational situation and may be beyond the control of most individual programs.

If the ideal is not the case, but the program has some latitude, the manager can develop this atmosphere for the program staff. Achieving this is a responsibility of leadership and this role may be carried by a supervisor who also performs management functions. As we have discussed, this is a role in which supervisors in small organizations find themselves. If there is lack of structure and direction in the total organization, a program supervisor can focus on her/his own unit and function within the context of whatever situation is present. This is a difficult place to be, but a program manager must recognize this and try to create a strong, successful unit.

The structure that produces results in a human service program is one that encourages team effort. This implies a democratic or collaborative form of management. This form of management recognizes the value of all staff persons and that each has a unique contribution to make to the tasks of a program, a task that is based on his/her particular role. Although there needs to be a final authority, decision making can involve contributions from everyone. Coordinated effort is very valuable in problem solving because the knowledge and information of a group is directed to one task and this is superior to one individual trying to accomplish the same task. The same process can apply to all major decisions that affect the organization as it responds to community needs with its services.

We have mentioned politics of a tribal organization and this is a consideration for a tribal supervisor or manager. A service program should strive to be free of involvement with local politics and avoid alignment with any political faction. The leader of a program should try to establish this independence as a matter of program policy. The higher authorities in some organizations may disagree with this conclusion but it is a mark of success that a

program be concerned primarily with the general welfare of the community and a high quality of services to people. If this is not possible, the program leader should try to minimize political interference for staff workers and act as a buffer between the program and higher political authorities.

It is difficult for an employee who is a member of the community to be completely free of political pressure because of the relational networks within a tribal community, but an employee needs to develop a professional attitude about his/her role and this should be emphasized in training. In short, develop some professional values that will guide the decisions and work of all employees. One guide to use as a reference are the professional values of social work that have been codified by the National Association of Social Workers. This is the task of management and leadership. (The reader is referred to the section on "Values and Ethics," for a greater discussion.)

Another consideration is that a child welfare program should be a source of specialized knowledge and information for the tribal government. Therefore, it is important for the manager and staff to be knowledgeable about child welfare practice and policy. A program should be in a position to advise the tribal leadership on social problems in the community and make recommendations to deal with these problems. These recommendations will be reflected in policies and programs. In this role, the managers and other key staff must inform themselves about current national and local policy and relate it to the needs of the program and local community. This requires that the manager read publications with the needs of the community in mind and, if necessary, research specific information to seek possible new approaches and interventions for child welfare problems that might be applied in the local program. Another important purpose for keeping abreast of this information is to know possible sources of funds for appropriate programs that meet the needs of the community. This activity requires effort and should be part of the managerial responsibility but some of this work can be delegated to staff and information gained should be shared in staff meetings.

In addition the experience of managing a program also produces knowledge and valuable information that can be systematically collected, organized and analyzed. The information gained will be useful data for evaluating and assessing the effects of approaches and methodologies. That is, management can assess and evaluate its programs and determine what has been effective for particular problems. This is a goal that should be considered for a long range project. There are technical assistance resources that are available to accomplish such a project.

Community based programs always should be relevant to local needs. In some organizations there is a tendency to apply for grants simply because they are available; this is done without regard to whether the purpose of a particular fund relates to a local need. To avoid this requires systematic planning for a program and its operations. (cf. the section on "Planning") Even a minimal effort of assessing needs and problems in the community and putting them in some kind of priority will guide decision making about whether or not to respond to announcements of funds from various sources. (see Hughes, in Chapter I,

"...the Community Resource Survey...p.22) Obtaining funds for a program that is not needed is a waste of time and effort because energy and attention are diverted from real problems that exist.

B. The Urban Indian Center

Scant attention is given to a segment of the native people who are moving in significant numbers to the urban centers of the United States. They comprise an entity which can be distinctly identified because its population shares common social, economic and cultural experiences rooted in the history of federal-indigenous relationships. While such a distinction has potent connotations for Indian community development in urban living, the reality is that the forces which mobilize this movement to cities more often than not impose self-fulfilling cycles of disorientation, frustration and failure. In consequence, these people present yet another dimension of need for human services, accompanied by the poignant irony of difficult or non-acceptance in both worlds, the one they left and the one they came to.

Although the topic of this section concerns management principles and organizational structures, the Indian center as a significant entity should be given attention in the field of Indian service systems. A critical concern involves the survival of these service organizations which historically have been neglected or, at best, placed in the lowest priorities to receive funds available to Indian people. Such an attitude is unrealistic when one considers that a majority of the Native American people reside in the large urban centers of this country. It is a phenomenon that Indian policy makers have ignored.

Funding dilemmas have confronted staffs of urban Indian centers since the inception of these service agencies. The usual funding sources available to reservation communities *via* federal agencies rarely recognize urban Indian populations as a part of their domain . The Bureau of Indian Affairs (BIA) and the Indian Health Service (IHS), major funding agencies for reservation tribal programs, offer minimal opportunities for urban Indian centers to apply for funding. During periods of reduced funding and increased competition, federal programs will eliminate urban centers from the application process. For example, P.L. 95-608, The Indian Child Welfare Act (ICWA), contains appropriations within its Title II for the funding of "Indian Tribes and Organizations" to "prevent the breakup of Indian families" (ICWA). Specifically, this law allows funding for the establishment and operation of "off-reservation Indian child and family service programs." However, in 1983, the BIA attempted to restrict ICWA funds, *via* administrative decision, to reservation / tribal programs only and, in fact, discontinued funding of ICWA programs in various urban centers. Only after litigation were these programs refunded but not without serious disruption of services and loss of staff. Proposed rule changes for P.L. 95-608, in 1991, contain funding formulas that attempt to address base amounts for almost all identified tribal governments yet do not include urban Indian centers, seemingly relying on making available only those funds "left over" after all tribal groups have been financed.

Because of the lack of specific federal Indian agency funding, urban Indian centers have had to be very creative and adaptive in order to stay financially solvent and to remain as a service resource to their client groups. Title XX of the Social Security Act has been used as a source of funding for a wide variety of human service programs; Jobs Training Partnership Act (JTPA) funds have provided for employment related services, and Administration for Native Americans (ANA) funds have been available for administration and economic development. However, urban Indian programs do not have unlimited or unrestricted access to these funds, being forced to compete with state, county, or local agencies. Urban Indian centers have been viewed as one more ethnic group vying for funding. Depending on the locality, urban Indian centers not having access to direct funding may be forced into combining with a consortium or umbrella agency, further reducing or restricting available funds. Additionally, intense efforts had to be expended to document a sizeable, identifiable Indian service population for the funding sources to justify separate Indian programs.

Regardless of whether federal resources are provided or not, urban Indian centers generate their own funds through fund raisers, board activities, membership in the United Way and various other means. Considerable staff time and effort are required to maintain services because of continually planning and conducting fund raising activities.

Urban Indian centers have had to reduce staff size, solicit donations, relocate and use many cost cutting devices in response to inflation, changing funding patterns and organizational demands. Planning and program development are based on multiple contingencies and alternatives, often including reductions or eliminations.

Urban Indian centers merit much more consideration and support from federal agencies which are responsible for promoting the well-being of Indian families and children wherever they reside. This requires a major policy change, not a welcome prospect for the policy makers, but a necessary change that is difficult to ignore in view of the realities facing urban Indian people today. An informed constituency should appreciate that the urban Indian center can be a major force in the development of viable Indian communities in cities. The Bureau of Indian Affairs, through the provisions of the Indian Child Welfare Act, has a mandate to provide the means for urban Indian service centers to deliver family-centered help. The Indian centers can provide the support services and interventions that are oriented and sensitive to needs of people caught in various states of transition and adjustment between two different cultures and societies. Economic survival and spiritual well-being are the critical needs faced by Indian people migrating to the cities. This requires more comprehensive and specialized services which are best delivered by a specialized service agency. The importance of urban services has been ignored too long and the short sighted federal policies regarding urban Indians, if they do not change, only can create greater problems to be faced at a future time.

Outline

Management

Introduction

I. Management - Basic Components
   - A. Planning
   - B. Budgeting
   - C. Organizing
   - D. Staffing
   - E. Directing

II. Methods / Techniques
   - A. Leadership
   - B. Styles of Leadership

III. Organization
   - A. Theories
   - B. Structures

IV. Values and Ethics

V. Management Considerations in Indian Community Organizations
   - A. Tribal Organizations
   - B. Urban Indian Centers

MANAGEMENT

I. Basic Components of Management

Desired Outcome: Readers will understand and improve their knowledge of the five (5) basic components of management.

Learning Objectives:

1) Identify and define five (5) basic components of management.

2) Describe the concept of interrelatedness between the components of management.

3) Distinguish between roles of the manager and the supervisor in each of the components of management.

4) Identify the critical elements contained in each of the five (5) basic components of management.

MANAGEMENT

I. Basic Components of Management
Pre-and Post Test

1) Name the basic components of management

2) Budgeting can be described as a control in the directing of programs.
True _____ False _____

3) It is vital that supervisors be organized in order that staff's capabilities are used effectively.
True _____ False _____

4) As Part of their job responsibility, supervisors must be accountable to which of the following in order to maintain program direction?
   A) Program staff
   B) Clients
   C) General community
   D) All of the above

5) Name four (4) tasks associated with management of an Indian child welfare program.

MANAGEMENT

II. Methods / Techniques

Desired Outcome: The reader will learn how leadership is a critical element of organizational management and influences the way workers perform their duties and responsibilities.

Learning Objectives:

1) The reader will be able to understand the difference between leadership and management.

2) The reader will be able to indentify three styles of management and their effects on workers.

MANAGEMENT

III. Organization

Desired Outcome: The reader will understand how management theory can affect or determine how an organization is designed and structured.

Learning Objectives:

1) The reader will be able to identify and define two traditional theories of management, the classical and the humanistic approaches.

2) The reader will be able to define the characteristics of the traditional, bureaucratic organizational structure.

3) The reader will understand how the traditional organizational structures can be adapted or altered to fit different management approaches.

MANAGEMENT

IV. Values and Ethics

Desired Outcome: Readers will improve their understanding of values and ethics as they affect Indian child welfare practice.

Learning Objectives:

(1) Define the relationship between values and ethics in child welfare practice.

(2) Describe the relationship between values of the community and ethics of the community based worker.

(3) Describe how the manager would develop rules for professional practice in an Indian community.

MANAGEMENT

IV. Values and Ethics
Pre- and Post Test

1) Define values and ethics.

2) In developing ethics for Indian child welfare practice, the manager must rely on professional program standards. T_____ F_____

3) Values within Indian communities are similar to all other Indian communities, and individuals can be assumed to share these values. T_____ F_____

4) Define the value that serves as a guiding principle for the Indian Child Welfare Act of 1978.

V. Management Considerations in Indian Community Organizations

Desired Outcome: The reader will be oriented to possible considerations for analyzing a service program or unit within Indian community organizations, with an emphasis on tribal governmental units.

Learning Objectives:

1) The reader will understand how characteristics of a tribal organization can affect program operations.

2) The reader will explore possible ways to avoid negative influences that can handicap a child welfare service program.

3) The reader will understand how to gain support for effective programs.

4) The reader will become aware of the importance of the urban Indian service center as a necessary part of the Indian community.

BIBLIOGRAPHY

Drucker, Peter F., *Management: Tasks, Responsibilities, Practices*, Harper & Row, Pubs., NY, 1974.

Frilley, Alan C., Robert J. House, Steven Kerr. *Managerial Process and Organizational Behavior,* Scott Foresman and Co., Glenvill, Il, 1976.

Green, James, *Cultural Awareness in the Human Services,* Prentice-Hall, Inc., Englewood Cliffs, NJ, 1982.

Macht, Mary W., and Jose B. Ashford, *Introduction to Social Work and Social Welfare*, Merrill, an imprint of MacMillan Publishing Co., NY, 1991.

CHAPTER 6

SUPERVISION

"I don't get paid nearly enough for this, you know!"
"WANTED, WANTED, WANTED! SUPERVISOR: MUST HAVE PROVEN ABILITY TO WALK ON WATER..."

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SUPERVISION

WANTED! WANTED! WANTED!

SUPERVISOR. MUST have knowledge and expertise in the field of Child Welfare Services. MUST be able to create an atmosphere of cooperation with professional, paraprofessional supervisers and upper administration. MUST have excellent communication skills. MUST have demonstrated leadership capabilities. MUST have appropriate educational background in Social Work. MUST respect cultural differences and have demonstrated ability to work cross-culturally. In addition, candidate MUST have proven ability to walk on water. **Pay is NOT commensurate with educational background and previous experience.**

INTRODUCTION

Supervision plays a major part in careers of most workers. Either as a student in field placement, a direct service worker in an agency under supervision, a supervisor of paraprofessionals or a supervisor for professional staff, most social workers experience supervision from one position or another.

Unfortunately, not everyone who achieves a position as supervisor is prepared to perform all the tasks and functions that the position requires. In some ways, it is similar to becoming a parent. Most of us learned our parenting skills from observing our own parents practice on us. If we were fortunate enough to have parents who were skillful in parenting, we could pass on what we learned to our children. So too, many supervisors have not had any formal training in supervision. Historically, in practice, knowledge of supervision was gained by being supervised. If we were fortunate enough to have had supervisors who were skillful in supervision, we could pass on what we learned to our supervisors. As a matter of fact, the majority of workers who become supervisors have not had a class in supervision, and have learned supervision by being supervised. (Middleman & Rhodes, 1985)

But, for better or worse, supervision is one of the hallmarks of social work education and practice. For better, its advocates suggest that it enhances high quality service and promotes the professional development of the supervisor. For worse, its detractors submit that it prevents quality performance by stultifying those who must suffer under it. (Weisman, Epstein and Savage, 1983)

Focus of Chapter

The focus of this chapter will be on the positive aspects of supervision as they are applicable to public child welfare agencies. It will do this in the context of acknowledgment of, and sensitivity to, the values, situations and circumstances of Native American clients and practitioners.

After examining the historical development, major themes and definitions of supervision in social work, the chapter will focus on the skills needed for effective supervision and for surviving the stress of becoming and enduring as a supervisor. More specifically it will provide:

Goals and Objectives

1. Communication skills for creating a cooperative work environment;

2. Relationship building skills with various constituencies, *e.g.*, supervisees and upper administration;

3. An assertive approach to supervision;

4. Methods for assisting supervisees in establishing clear goals and objectives;

5. Techniques for giving clear feedback to supervisees;

6. Methods for dealing with the stress of assuming the role of a supervisor.

The chapter will not concentrate on the substantive knowledge of a particular setting that a person needs in order to be a good supervisor, since that knowledge differs from agency to agency. It assumes that supervisors are well grounded in the policy and procedures of their particular agencies and have substantive knowledge of child development, family dynamics, referral sources etc. Nor will this chapter attend to a narrow definition of clinical supervision, since for the most part, child welfare workers are most involved in case and contract management, and other roles, which are less focused on therapy or counseling as such. For an excellent treatment of clinical supervision in social work, the reader may review Munson (1983).

History and Themes

There are excellent books and articles that trace and analyze the history and development of supervision in social work from the time of Mary Richmond and the friendly

visitors to the present (Harkness & Poertner, 1989; Miller, 1987; Kadushin, 1985; Middlemen, & Rhodes 1985; Munson, 1983; Shulman, 1982;). Although much of the historical development has an academic interest, what is important for our purposes is to examine some of the major themes that have developed over the past ninety years.

Supervision has been viewed in diverse ways over the years. Historically, the emphasis has shifted between the perception of supervision as either an educational process or an administrative process, or a mixture of both (Miller, 1987). Kadushin (1985) add the concept of supportive supervision, which focuses on the problem of sustaining workers, when they have job related discontents or discouragements, by offering emotional support and making efforts to assist them through these difficulties. The caveat for supportive supervision is that the supervisory relationship is not confused with the therapy relationship and the supervisor is not seduced into playing the therapist with his/her supervisee.

In the early days, the university curriculum, based on graduate education, strongly influenced the teaching function of supervision. Given the primacy of casework, and clinical practice and the perceived need for self-awareness and self-knowledge, the focus on teaching through the supervisory relationship was further entrenched (Miller, 1985). As a result, the very intense experience that a student can have with a relatively low case load became the norm for post graduate training supervision, often to the detriment of the administrative needs. In some ways, this weighting of the educational process of supervision has been perpetuated by recognition by the National Association of Social Workers that candidates for the Academy of Certified Social Workers are required to have been supervised for a minimum of two years following the conferring of the MSW (Kadushin, 1985).

Another theme that has appeared in the literature is the dependency vs. independency issue. One of the concerns has been that the supervisor will act the part of the capable parent to the dependent child. The goal of effective supervision is to help the worker function responsibly and to encourage self-learning rather than create dependency (Miller, 1987).

Definition

Despite the fact that the literature on supervision goes back to the end of the nineteenth century, implying connotations for expertise in defining the function, yet Harkness and Poertner (1989) point out that most definitions of supervision in social work are circular in nature. The definitions either describe "what" supervisors do, or what they "should" do. The authors claim that this circular type of definition reflects the shift from supervision focusing on clients to supervision centering on workers. Once the shift was made from clients to workers, the thrust was on training rather than on outcomes.

After receiving a number of definitions that had been part of the social work literature on supervision for the past fifty years, Kadushin (1985) proposed the same definition that he offered in the first edition of his book on supervision (1976).

> "...a social work supervisor is an agency administrative staff member to whom authority is delegated to direct, coordinate, enhance, and evaluate the on the job performance of the supervisees for whose work he is held accountable. In implementing this responsibility the supervisor performs administrative, educational, and supportive functions in interaction with the supervisee in the context of a positive relationship. The supervisor's ultimate objective is to deliver to agency clients the best possible service, both quantitatively and qualitatively, in accordance with the agency policies and procedures. (p. 24)

Middleman and Rhodes (1985) give what they refer to as a simple working definition that incorporates both the teaching and administrative functions of supervision. "We think 'educative' supervision concerns enhancing the professional development of the practitioner, while 'administrative' is related to the organization's need for efficiency and accountability." (p.3)

An even simpler definition that Miller included in both the 1977 and 1988 editions of the Encyclopedia of Social Work is "...supervision is essentially a function of administration and must be primarily related to getting the work done." (1987, p.751). Although this definition does not specifically tell what a supervisor does, or should do, it does implicitly put the focus on the major thrust of supervision which is to serve the client. It also highlights the administrative component of supervision.

OVERVIEW OF SUPERVISORY RESPONSIBILITIES

This section will examine the broad goal of creating a collaborative atmosphere, and then look more specifically at leadership styles, the use of authority and the communications skills necessary to function effectively in the role of supervision.

Cooperation vs. Competition

Based on an integration of the writings previously referred to in this chapter, our view is that the primary responsibility of a supervisor is to create an atmosphere in his or her part of the workplace, where workers are treated with respect, and their dignity as individuals, with their own strengths and weaknesses, are valued. Without this atmosphere, it is unlikely that the best interest of clients will be served. At times this will entail working towards changes in the organization that might not be responsive to needs of direct service workers. For example, when the organization does not provide a physical environment in the workplace that is conducive to getting the job done, the supervisor might need to intervene with upper administration. We recognize that agency policies and procedures and physical environments make an impact on individual workers and may need to be changed. However, our attention will be more on the micro environment, the interactions between supervisor and supervisee, and how an atmosphere of cooperation can be created in this sub-system in the larger system.

Creating an Atmosphere for Cooperation

Middleman and Rhodes (1985) report the results of a study done in 1973 by what was then the Department of Health, Education and Welfare that analyzed the results of 100 studies in the previous twenty years. The report found that what workers want most is "to become masters of their immediate environment" in the work place and "to feel that their work and they themselves are important---the twin ingredients of self-esteem" (p. 121). Workers need to feel valued and needed and not manipulated or used. This is central to the quality of service delivered to clients.

These results are supported by other studies in job satisfaction (Butler, 1990; Conway, 1987; Glicken, 1980). Butler (1990) relates that by having the supervisor pay attention to how work gets done, management sends a message that it values what the staff is doing. This in turn, can contribute to creating an atmosphere of cooperation.

> "Social workers (especially in the public agencies) do not have many grateful clients, nor does the outside world often express appreciation of what they do. Staff clearly get a lot of support from their co-workers, but this is not a substitute for hearing regularly from management that their work is important and appreciated" (p. 116).

The following is an illustration of how an adoption agency on the west coast validates its workers and contributes to a cooperative atmosphere.

The agency recognized that atmosphere is a critical issue for worker satisfaction and performance. The agency established a centralized bulletin board recognizing the "Worker of the Week", which changes weekly. Workers are nominated by their immediate supervisor for various reasons, *i.e.*, placement of an older child, post adoption group work, volunteer work in their community.

Workers feel it is really an expression of appreciation and honor by supervisors for the extra effort they give daily for the children they serve. The message is that they do make a difference in children's lives and the supervisors want to make a difference for their workers .

Cultural / Family Values and Cooperation

The values that underlie a cooperative atmosphere in the workplace are inherent in Native American culture. Respect for the dignity and worth of the individual, a spirit of cooperation as contrasted with that of conflict, and acknowledgment of the contributions that an individual makes for the common good are part of the Native culture, and have an impact on individual behaviors. Our purpose here, is to make the connection between values and how these values affect the role we play in the workplace, which in turn contributes to an atmosphere of cooperation or conflict.

Cultural values are transmitted through the family, and often become part of the role that the individual assumes in her or his family of origin. Roles we absorbed from our culture influence how we behave as workers and supervisors. The same role is frequently carried over from the family to the workplace (Woititz, 1987; Fausel, 1988; Schaef & Fassel, 1988). Those old behaviors that we learned so well in our families, continue to influence how we behave as workers or supervisors. Earnie Larson (1985) put it this way: "What we live we learn; what we learn we practice; what we practice we become; and what we become has consequences" (p. 26).

However, the role we have had in our family may contribute to a positive or negative atmosphere in the workplace. For example, if an oldest child has been the primary caregiver in his or her family, the super responsible person, the family hero, the one that makes the rest of the family look good, he or she more likely than not, plays that same role in the workplace. The same person who was an enabler in his/her family, may continue that role in the workplace as a supervisor. As his or her enabling behaviors allowed siblings not to take responsibility for their chores, or take responsibility for a brother's or sister's homework, so his or her enabling behaviors as a supervisor may allow workers not to take responsibility for their case load. Both the siblings and the workers know that "big brother or sister" will pick up the pieces. This also can send a subtle message to workers, "My supervisor must think that I'm not competent, since he/she is always taking care of business for me."

Basically that is the same message the supervisor's siblings, spouse or any one else the supervisor has enabled, received. The first step in making a change in our old behaviors is recognizing what we are doing and do something different. It often is not as important what we do different, but just that it is different. A change, large or small, can contribute to a cooperative working atmosphere. "Just for today I will not enable my supervisees. I will let them make their own mistakes, so they can learn from them."

While supervisors are learning new skills, it is important not to lose sight of the old values that are already second nature, but rather to capitalize on those values from the Native culture that support and enhance cooperation, or if you will, collaboration. These values are well articulated and contrasted with non-Indian values, by a number of authors (Dubray, 1985; Cross, 1986 and Joe, 1989). They are covered in Chapter 2 of this book, and do not need to be restated here.

However, Cross' article "Drawing on Cultural Tradition in Indian Child Welfare Practice," makes a strong case for maintaining cultural integrity, and drawing on the traditions of natural helpers, while providing services. The same characteristics that are important in creating a sense of trust and cooperation between client and worker, are important in creating a cooperative atmosphere in the supervisory relationship.

Frolund et al., (1981) describe these characteristics: "The characteristics of a natural helper, such as good listening skills, understanding of problems through experience, and motivation to help, are models that form the basis of helping in Indian child welfare" (p.46).

LEADERSHIP STYLES

Use of Authority

Closely connected to an atmosphere of cooperation is the leadership style of the supervisor, and how he or she uses authority.

The often quoted study of Lewis and Ginerich (1980) of American Indian and non-Indian social work graduate students, suggests, among other things, that skills or knowledge are less important than the kind of a person the leader is. The subjects in this non-random selection, were less in favor of an authoritarian-style and aggressive leadership behavior than were their non-Indian fellow students. It becomes important to define what we mean by aggressive behavior and contrast this to other styles.

In her book, Assertive Supervision, Drury (1984) distinguishes between three styles of supervision: nonassertive, aggressive and assertive supervision. At first glance, assertive supervision seems to go against the values of American Indians. But as she describes and contrasts each style, assertive supervision seems more compatible with the values of respect and honesty that underlie the basic American Indian belief in the dignity and worth of each individual, of all our "relations." That worth is not achieved in competition with everyone else, but is gratefully accepted in cooperation with everyone else.

Looking more closely at these styles, it becomes apparent that how they are understood will effect their utility, since they can have either a positive or negative association. If we define assertive behaviors as Drury does, it is apparent that they are compatible both with the values we have discussed as well as good management and supervision. She describes a person who acts in an assertive way as someone who:

> "...makes clear, direct, nonapologetic statements about his (her) expectations and feelings, criticizes in a descriptive rather than a judgemental way, persists in following through on issues even if he (she) meets resistance, listens to other's views respectfully and negotiates and compromises. In addition he (she) does all of these things using words, voice characteristics and body language that will be taken seriously without humiliating others" (p. 3)

Contrast this with a non-assertive approach, by which the supervisor tends not to say directly what he/she wants or feels, speaks indirectly or apologetically, says something to the wrong person, waits too long to confront a problem, gives up too easily, and compromises without making his/her needs clear; or an aggressive approach in which the tendency is to blame and shame, make judgemental criticisms, act with too much power, too quickly, and refuse to listen or negotiate or compromise (Drury, 1984). Both non-assertive and aggressive approaches may force the supervisee into accommodating rather than bargaining and negotiating around an issue, and accommodation equals resentment. The more a person accommodates and is not given the opportunity to participate, the more

likely he or she will be to build up resentments. Often these resentments come out as anger, when least expected. Another way of looking at this assertive approach is the script writing technique developed by Bower and Bower (1976). They refer to a DESC Script. Their premise is that in order to be effective, a supervisor must be able to execute the following:

D - Describe what the employee is doing that creates problems.

E - Express why a particular behavior is problematic for the supervisor or the organization.

S - Specify what he/she wants the employee to do differently.

C - Consequences for either succeeding or failing to change behaviors are outlined.

To illustrate:

Mr. Joseph, supervisor, with Department of Social Services has experienced a reoccurring problem with Ms. Haley completing and processing her paperwork for day care services in a timely manner. He is now going to use the DESC Script with Ms. Haley. Mr. Joseph has scheduled a supervision session with Ms. Haley in which the following is discussed:

D - Describe what the employee is doing that creates problems.

Mr. Joseph: Ms. Haley, as we have discussed before, your paperwork has not been processed in a timely manner. At this time, day care providers' payments have been delayed creating a problem for our providers and the children receiving day care.

E - Express why a particular behavior is problematic for the supervisor or the organization.

Mr. Joseph: The late processing of your paperwork not only creates a servere problem for our providers but it refflects badly on myself and your co-workers. Our quarterly report for the unit is drastically reduced in compliance with agency policy when your paperwork is late.

S - Specify what he/she wants the employee to do differently.

Mr. Joseph: Ms. Haley, I want you to review your day care files for the month and to set a goal for the number of cases which need to be processed weekly. We'll schedule a weekly supervision session to review your progress.

C - Consequences for either succeeding or failing to change behaviors are outlined.

Mr. Joseph: Ms. Haley, the positive consequences for processing your paperwork in a timely manner will be:

1) Satisfaction by providers because they will be paid on a timely basis.
2) Your unit will receive a higher percentage of compliance on their quarterly reviews.
3) You will feel better about your job and work will not be left undone.

Mr. Joseph: Ms. Haley, the negative consequences for not processing your paperwork in a timely manner will be:

1) Possible loss of your day care providers because of late payment.
2) Further personnel action and possibly suspension without pay or termination.

The bottom line is, whether or not the DESC Script, which is basically an assertive approach, produces and promotes the spirit of cooperation necessary for the organization to function optimally? As they say in Reality Therapy, "Is what you're doing working? Do you get the results that you want? If not, are you willing to try something different, even though it might seem foreign at first?" A twelve-step saying, "Fake it till you make it," might be appropriate here, as we try on new approaches. If the non-assertive approach - being vague, non-specific about expectations, not having clear consequences for noncompliance - works, then we might consider continuing with it. Our observation is that, in the long run, the more direct approach works.

Drury (1984) maintains that the assertive approach to supervision is the most effective, and most respectful, way to work with people in any type of interaction. It is based on the assumption that:

1. People want to do a good job. The role of the supervisor is to uncover blocks or obstacles by creating a more productive problem solving climate. More often than not, the obstacles are: limited abilities or skills, not understanding the job, different expectations, poor work habits, or poor relationships with the supervisor or other workers. Approaching a supervisee with a positive attitude, that they do want to do a good job, is more likely to uncover the obstacle that is hindering job performance.

Positive Approach by Supervisor:

Supervisor: John, I know you take pride in your work and really want to do a good job. It has been nine months now since you started and there appear to be some substantial problems. I want you and I to look at those problems to determine why there are problems and think of some possible solutions for you to consider in solving these problems. I'm here to assist you in whatever way I can because I also want you to succeed.

Negative Approach by Supervisor:

Supervisor: John, you've been at your present position for nine months and there have been substantial problems. You need to identify the basis of

these problems and let me know what you're going to do to change your behavior. I want to see you again in two weeks with a written action plan.

2. People have a powerful need to save face. Blaming and shaming is most likely to put the supervisee on the defensive. Focusing on the behavior that needs to be changed, and helping him/her accept responsibility for problem behavior, rather than placing blame, allows the supervisee to make changes and to save face at the same time.

Blaming Supervisee:

Supervisor: Janet, you were asked several weeks ago to complete the annual report for compliance with policy #5-57-2, social history. You knew how important this report is for our annual legislative session and a variety of department managers are depending on this report. Now, you let me know it will not be completed for another week. This is not acceptable and there will be repercussions for your lack of planning.

Focusing on Behaviors:

Supervisor: Janet, I understand your annual report for policy #5-57-2, social history will not be available for another week. I want us to review the process you used for planning this project. Please share with me our schedule for the past few months in completing this project. Let me give you some suggestions:

1) Deadlines for collecting information from staff is too long. Set more appropriate deadlines for yourself.
2) Getting your report to the printing department for scheduled printing should have been earlier. Knowledge of other department deadlines.

3. Failing to tell someone about a problem is not doing him/her a favor. This approach, no matter how well intentioned, deprives the employee of an opportunity to change. Honest feedback, although it may be painful, is fairer in the long run.

Interoffice Memo

TO: All Case Worker II

FROM: Mrs. Smith, Supervisor

SUBJECT: Client Resources

It has come to my attention that several case workers consistently are not familiar with client resources in our area and throughout the state. This is a reminder that it is part of your job description to assist clients in acquiring appropriate resources, and you are expected to have resource information available for clients.

4. No one can force anyone else to change. "A supervisor encourages people to change by letting them know very clearly what is expected. He/she lets the employee know the consequences and listens to try to understand why the employee objects..." Otherwise, a power struggle results.

Power Struggle with Supervisor:

Mr. Sonnet: Ms. Fisher, I've asked you several times to process your completed investigative findings into the computer immediately. As I told you before this is not a clerical responsibility, it is part of your job responsibilities. You're right when you say there's no way I can make you enter your investigative findings immediately into the computer. But, If you continue to wait for at least one week, I'll have to mark down your case performance as well as initiate possible personnel action.

Use of Authority / Power

As the worker has to deal with the issue of authority with clients, so the supervisor has to deal with authority with supervisees. Palmer (1983) argues that authority is not only present in every social work relationship between client and worker, but is the foundation of the relationship, "...because potentially clients do not become fully engaged until they grant authority to the worker" (p.120). She also contends that many social workers fail to engage clients because they are reluctant to seek and use authority. If this is true for client-worker relationships, it is also true for supervisor-supervisee relationships.

Shulman (1982) claims that the parallels between the supervisor-worker and worker-client relationships are most apparent when we examine the use of authority. Authority has a negative connotation for many social workers, since they associate it with power, which is often perceived as being incompatible with the values of helpers. Or they are uncomfortable in using authority, because they equate authority with power. Palmer (1983) distinguishes between power and authority, stating that authority is derived from power. Quoting MacIver she maintains: "...power is the capacity to control the behavior of others, either directly by fiat or indirectly by manipulation whereas authority - the established right to make a decision on pertinent issues--is a transactional concept and includes the committed consent of another person who is responsive to that authority". (p.120)

The key to this view of authority is that it is transactional. It's not a one way street with the person in authority imposing her/his will. Kadushin (1985) distinguishes between authority and power differently. He writes:

> "Authority is a right which legitimizes the use of power; it is the sanctioned use of power, the accepted and validated possession of power. Authority is the right to issue directives, exercise control, require compliance...In the most uncompromising sense, 'authority is the right to demand obedience; those subject to authority have to obey,...Power is the ability to implement the rights of authority." (p. 87)

After describing different types of power (reward power, coercive power, expert power, etc.) Kadushin goes on to suggest that how power is used, the attitude, the spirit with which the power is employed, is perhaps what is most significant. If power is exercised with flexibility and openness, shared with supervisees in a predictable manner rather than perceived as capricious and arbitrary, it is less likely to be resented and resisted. (Kadushin, 1985)

There can be little doubt that power is a part of the supervisor-worker relationship. How it is used is the issue. When a supervisor delegates power to a social worker to approach parents, when a case of child abuse or neglect is reported, he/she is deputizing that worker with the power he/she has been delegated as supervisor. The supervisor's power originates from the mandate of the agency, which in turn is derived from the auspices of the community. Seen in this perspective, there is less probability of power being abused, since, for the worker, the power is delegated, and not perceived as that worker's personal power.

Middleman and Rhodes (1985) point out that supervisors will earn respect for the use of authority if they are consistent in the following areas:

1. Developing clear definitions of goals and objectives.

John, Case Worker II, has been employed with Protective Services for one (1) year and is having problems with case goals and objectives. The supervisor and John are meeting to discuss the following case:

Mr. and Mrs. T. had three (Terry 1 yr., Jason 2 1/2 yrs., Cristin 4 yrs.) of their five children removed because of abuse and neglect.

a. John's Case Goal: Return children to parents.

b. Objectives: Secure community services.

After supervisory session:

a. Return Jason, Cristin and Terry to Mr. and Mrs. T. by 3/1/90.

b. Objective I. Division of Social Services will provide weekly visitation for Mr. and Mrs. T with Jason, Cristin and Terry through a visitation contract.

c. Objective II. Mr. and Mrs. T will make application for public housing assistance within one week.

Objective III. Mr. and Mrs. T will attend parenting skills training at the Mental Health Center every Thursday at 5:30 pm.

d. Objective IV. Mr. and Mrs. T will attend a parent support group with Parents Anonymous on a bi-weekly basis.

2. Setting equitable expectations for quality of work.

Mr. Johnson, supervisor, is having a supervisory session with Ms. Getty regarding job expectations

> "Ms. Getty, when you first started, we covered the job responsibilities for a Case Worker III. Now that you've been with DES for six months and been to Core Training for four weeks, and have had experience in the field as well, how do you feel about the job expectations? There are several expectations I would like to clarify with you. You will be expected to complete your initial contact with the family within 5 days after your case assignment. Your case plan and social history must be completed within 60 days of your initial case assignment. A case staffing must be held within the first 45 days of case assignment and every 6 months thereafter. Ms. Getty, if you find meeting these expectations creating a problem, please let me know so we can discuss your performance."

3. Balancing supervisees' background and needs with agency requirements.

Mrs. Troxel supervises five Case Worker III Child Protective Service Workers. Mrs. Troxel just has learned she will have a pilot program on working with chemically dependent families.

Mrs. James has been with the Department of Social Services for three years. She had previously worked for a half-way house for chemically dependent women. Mrs. James was experiencing the beginning signs of burnout. Mrs. James is interested and will be considered as a final candidate for the position working with chemically dependent families.

4. Balancing use of praise with use of constructive critical feedback. We mentioned feedback above in our discussion of the DESC Script. It is such an important component of supervision, it merits further discussion.

Feedback

One of the roles of the supervisor is to give feedback on the quality of the worker's assessments and interventions. How effectively he or she does this depends on how effectively he/she can communicate. Morrison (1980) suggests that effective communications in the workplace is essential for cooperation, problem-solving and productivity. She sees feedback as one of the most important skills in effective communication. A supervisor must have the ability to communicate to the worker those observations or experiences about that workers performance which have positive, and which have negative, effect on his/her work. Morrison goes on to list and describe nine criteria that are essential for feedback to be effective.

1. FEEDBACK SHOULD BE DESCRIPTIVE. *i.e.*, should describe as carefully as possible the behavior you are referring to. "Yesterday, the report that you handed in was inaccurate in these two places. Let me show you where."
2. FEEDBACK SHOULD BE NON-EVALUATIVE. Avoid terms such as right or wrong. "That case presentation was lousy". "Lousy" is a value laden word
3. FEEDBACK SHOULD REFER TO BEHAVIOR THE WORKER CAN CHANGE. "It would be helpful if you make your case notes as soon as possible after your interview."
4. FEEDBACK SHOULD BE SPECIFIC RATHER THAN VAGUE OR GENERAL. "You often go off on a tangent in our group meetings." This is too vague. A more specific statement would be: "At the meeting this morning you started to give specifics about the Anderson family, and you got off track by bringing up the Johnson family and their similar situation. You never finished the plan for the Andersons."
5. FEEDBACK SHOULD BE CONSTRUCTIVE RATHER THAN DESTRUCTIVE. "You'll never learn how to treat people." Not only is this statement destructive, it is poor role modeling for what the supervisor is trying to teach.
6. FEEDBACK SHOULD INCLUDE POSITIVE POINTS AS WELL AS NEGATIVE POINTS. "The fact that you were well prepared for our conference was a real time-saver."
7. FEEDBACK SHOULD BE HONEST. This is a variation on what has already been discussed under the assertive approach.
8. FEEDBACK SHOULD EXPLAIN HOW BEHAVIOR EFFECTS YOU AND OTHER PEOPLE IN THE ORGANIZATION. "Your being on time makes it easier for me to keep on schedule."
9. WHEN FEEDBACK IS NEGATIVE, IT IS HELPFUL TO "SANDWICH" THE NEGATIVE FEEDBACK WITH POSITIVE FEEDBACK. "I appreciated your positive comments about our work plan at our last meeting. I would also like to let you know about something during that meeting that bothered me. Your side conversation with Jane was distracting to me. I hope you will be careful of that in the future. By the way, your humor is greatly appreciated. It eases tension when we are working under pressure."

Gambrill and Stein (1983) propose that written agreements for each worker be used for regular feedback session. The written agreement between supervisor and worker is helpful in clarifying expectations. If specific outcomes, that are jointly agreed upon, are spelled out, then the feedback sessions have a focus. The authors also suggest that if it is agreeable with the supervisor, changes that supervisees desire of the supervisor be included in the agreement. Their book has a number of good examples of the agreements workers and supervisors may set up. It also has good suggestions for how a supervisor may

encourage and maintain the self-reinforcing skills of workers. The very process of the supervisor sitting down with the worker and going over the outcomes he/she has set for their caseload is good role modeling, and, in itself, is a teaching technique for helping the supervisee to set objectives for clients.

For example, the supervisee, Ms. Fisher, may want to include in her contract the following behaviors she would prefer her supervisor, Mr. Jackson, to practice. Mr. Jackson will:

1. In a weekly supervision session with Ms. Fisher, give positive feedback on worker's completing assigned investigations and processing the appropriate paperwork in a timely manner.
2. Provide specific information on areas of concern and direction for appropriate changes.
3. Make specific training available, within the next three months, in areas where Ms. Fisher is having difficulty.
4. Increase efforts to improve the working environment, *i.e.*, provide needed file cabinets and adequate air conditioning.

Role of the Supervisor in Giving Feedback

There are a number of roles a supervisor can assume in giving feedback: counselor, conferee, coach, etc. Although perhaps less familiar in this context, the role of coach might have utility for looking at how a supervisor gives feedback. If you were ever coached in any sport, you know that, usually, a coach first gives a series of instructions for accomplishing an objective: e.g. if you want to improve your time in the doing the back stroke, extend you arms in a certain way; if you want to improve your batting average, grip the bat in a certain way in addressing the ball. Next he/she observes how you did what was suggested, and then give some feedback to support what you did successfully, or he/she suggests how you might perform differently and more effectively.

Usually, a coach does not go into any psychological problems that might be interfering with your concentration in perfecting your stroke or hitting the ball, nor does he try to give you deep insight into why you might not be performing better. Basically, a coach Describes, Expresses and Specifies. The consequences are inherent in the activity. It can be helpful to describe your role as a coach, since most people can relate to what a coach does, either having been coached or having observed coaches on television. Also, thinking of the role of supervisor as a coach can help deter the supervisor from "therapizing" the supervisee.

TYPES OF SUPERVISION

Individual

Supervision historically has been practiced through the individual conference between supervisor and supervisee. In Kadushin's 1973 study, 86% of the 469 supervisors and 384 supervisees surveyed, reported that individual conferences were the most frequent context for supervision. Although Shulman, Robinson & Lucky (1981) are unclear about the preference and satisfaction of workers for individual sessions, as opposed to group supervision it is clear that individual sessions still predominate.

In general, practitioners seek direction (Munson, 1983). Even the most seasoned practitioners need advice and support at times. Typically, inexperienced workers need and prefer individual sessions more than experienced workers. Inexperienced workers need help with the specifics of the job, and aid in developing techniques for dealing with the particular population and problems that the agency addresses. More experienced workers usually need more general evaluation of their approaches, which may be more appropriate for group supervision. Although there are times when mixing inexperienced and experienced workers in group supervision can be beneficial, in general, it can be a disservice to one or the other. To focus on the needs of the inexperienced worker can be at the expense of the experienced worker. To focus on the needs of the experienced worker can be beyond what the inexperienced worker will find beneficial.

Given the outcome focused approach to supervision proposed by Gambrill and Stein (1983) mentioned above, it is not surprising that they suggest individual sessions for all supervisees, to reinforce their strengths and point out areas in which performance could be improved.

The individual model of supervision described above has been referred to as "the apprentice model" of supervision. Individual supervision provides a forum for socialization of workers to the profession, and has potential for administrative control. However, it does not afford workers the opportunity for sharing with their peers and receiving support for the difficulties and problems of the intense caseload workers experience in child welfare agencies.

Peer Supervision

Marks & Hixon (1986) suggest peer supervision for child welfare workers. They base their proposal on their observation that child protective workers often are new graduates, highly motivated but inexperienced, who experience role conflict because of the various demands made on them. The "role strain" that they experience is an important factor in worker burnout. In a grant from the National Center on Child Abuse and Neglect, "Upgrading the Quality of Child Protective Services in Public Agencies," the authors implemented a peer supervision program to offer staff the opportunity to "...increase trust,

decrease anxiety, and facilitate increased independent and interdependent functioning, all of which are important in child welfare practice". (p.420)

Peer supervision is defined as "...a group of staff who have common problems and goals and who meet regularly to present cases formally, share ideas, gain insights and grow professionally" (Marks & Hixon, 1986, p. 421). The project is quiet clear in stating that peer supervision is not meant to replace individual supervision, or to serve as group therapy. Rather it is an opportunity to express negative feelings, improve intervention skills, and gain knowledge of community resources as well as reduce feelings of isolation and develop a group and professional identity. The positive results reported in the Marks & Hixon article, and other reports of peer supervision that they mention in their article, are good reasons for considering it as an effective method of assisting workers with professional growth and development.

BECOMING A SUPERVISOR

If a supervisor is going to be effective, he/she needs to deal with stressors in one's own personal and professional life. A new supervisor has some additional stressors to deal with. Just as the same traffic that produces strong emotional and physical reactions in the beginning driver, may hardly be noticed by the experienced and confident driver, so too, new supervisors may feel overwhelmed by what is second nature to the experienced supervisor. This is especially so if a worker becomes a supervisor in the agency where he/she has been a direct service worker. They are subject to the additional stress associated with assuming a new role or experiencing any major transition.

The new supervisor is required to change working relationships with other agency staff, which in itself can be stressful. Where she/he was once a peer with other direct service workers, one is now a peer with a different level of agency staff. As in any change in the balance of a system, this requires adjustments throughout the system. The best way to deal with the potential jealousy or rivalry with former peers is to communicate directly with the person who is perceived as harboring resentments, or put potential resentments on the table, before they become issues.

In the following scenario, Mrs. Garcia was recently promoted over two co-workers. One co-worker, Mr. Turner, is having difficulty adjusting to Mrs. Garcia's new role. Mr. Turner has questioned "every" supervisory decision made by Mrs. Garcia. Rather than let things fester, Mrs. Garcia puts the issue on the table, and verbalizes her concerns, based on her perceptions of Mr. Turner's behavior:

Mrs. Garcia: Mr. Turner, I understand you applied for the supervisory position that I have. I've noticed that you seem to question every decision I've made, and I'm wondering if there's any resentment because I got the promotion?

Mr. Turner: Mrs. Garcia, frankly, I did feel that I was more qualified and more experienced than you. I've even questioned if there was reverse discrimination operating in the decision making process.

Mrs. Garcia: I appreciate your candor, and I'm glad we can discuss this openly. I don't have information about criteria they used for my selection. If you have any concerns, I hope you would talk to the program director, who made the decision. You and I have worked together for several years, and I know you are a competent professional. You have the interest of your clients at heart, and really want to do an excellent job. You take pride in your work. I have a problem however, when you question every decision I make, or at least it seems like every decision.

Mr. Turner: I feel it is within my rights to question your decisions that directly affect my work and my clients' availability of service.

Mrs. Garcia: I appreciate that, and I don't have any question about your good intentions. What I would really like is for you to discuss issues with me

as they come up, before writing a memo or complaining to other staff members. I think that this would be a more productive way of our using our time.

Mr. Turner: I'm willing to discuss these issues with you, but I'll continue to advocate for my clients and express my feelings about decisions that affect me.

Mrs. Garcia: I'm glad we were able to talk about our concerns openly. I'll do everything I can to answer your questions. I know we both have the interest of our clients at heart.

In addition to going from practitioner to supervisor with its attending stressors, the new supervisor, whether he/she has changed agencies to become a supervisor, or continues in the same agency, needs to interact with several different categories of workers. There is the experienced worker who has been in the agency for a number of years. This worker often treats the new supervisor as one would a stepparent entering a new family. "This isn't the way Joanne, (the former supervisor), treated me. She respected my experience and expertise, and I don't appreciate your questioning my decisions." How the supervisor responds to what appears to be a threat to his/her authority can determine the future working relationship with the supervisee. She may respond negatively as illustrated below:

Mrs. Garcia: Ms. Hernandez, I'm not Joanne and I don't care how Joanne treated you. I know you have a problem with my supervision. I will be questioning your decisions if I feel it's necessary, and if you don't like that, I'm sorry, but that's the way it's going to be. It appears to me that Case management has not been done appropriately in the past, and services to families have not been consistent with agency standards. You are a professional social worker, and I expect higher quality of work from you. Under my supervision the standards and quality of Case management within the Department will be higher than they have been in the past. If you don't like that, then maybe you better start looking for another job.

The results of that approach are predictable. The supervisor is reacting, and not responding to Ms. Hernandez's feeling of insecurity and perhaps abandonment by her former supervisor. Just as our goal in working with clients is to teach them to respond to life events, and not to react, so the supervisor must model the same behavior to the supervisee. The following is more of a response and less of a reaction to the same statement.

Mrs. Garcia: Ms. Hernandez, I know changing supervisors can be difficult. We all become accustomed to the familiar, and I'm unfamiliar. I know you know that I'm not Joanne, and that it will take some time for us to develop our own relationship.

I have a great deal of respect for your experience with the Department. I know there are many things you can teach me about

the agency and I want us to work together for the benefit of the families we serve. I hae a great deal of experience also and hope to share that with you. We can learn from each other.

I do have some questions about how you are following several of the agency's procedures, and that's why we need to talk.

You know, Ms. Hernandez, I always want to respect you and your position as senior worker, and I would appreciate it if you would bring it to my attention if your perception is that I'm not valuing your position in the agency.

Then there is the new, inexperienced worker, and the new experienced worker, who have come to the agency from another, similar, setting. Although each has to be orientated to the policies and procedures of this particular agency, the new inexperienced worker needs more supervisory time, to both adjust to the agency and to the new role. The more experienced new worker often has stress about what is expected from her/him in this new setting, because of her/his experience. As in other situations, the best way to approach both these workers is to help them express their concerns and deal with expectations on a clear contractual basis. (Schulman, 1982)

One of the major reasons that supervisors experience stress is the fact that the majority of practitioners, who become supervisors, do not believe they are prepared for the role, and would have preferred to remain as direct service providers, if there were sufficient rewards. A study done by Scurfield (1981) reported that 61% of respondents would have remained in direct service positions if promotions had been available at that level. Unfortunately, for a direct service worker to receive financial compensation for experience and expertise, they more often than not need to go into an administrative position. This is similar to the corrections field, where officers working in the field, who enjoy what they are doing, and are good at it, are removed from the field and become sergeants, in order to receive a substantial increase in pay. Instead of working directly in the field, they are now confined to working behind a desk, in a role they do not necessarily enjoy or are particularly good at.

It would seem logical to let those workers, who function well and enjoy their work at the direct service level, continue to do what they do best, with appropriate financial rewards. At the same time, those who want to move into administrative positions could do so because that was what they really wanted to do, and had prepared themselves to do, not just because it was a step up the financial ladder.

MANAGING THE STRESS OF SUPERVISION

Clients, supervisees and new supervisors do not have a corner on the market of experiencing the type of stress that can eventually lead to burnout. An experienced supervisor is not beyond suffering from stressors in the workplace. Stress is a "given" in our personal and professional lives. The key is, how we handle the stress that being a supervisor predictably provides. The way we manage stress, and the skills we develop in stress management, will influence the decisions we make as supervisors, which will in turn effect the workers we supervise (Gambril & Stein, 1983).

Since there is often confusion as to whether stress and burnout mean the same thing, it would be helpful, for our present purposes, if we defined stress and suggested some coping skills, which hopefully will prevent burnout.

Stress is generally defined as "a response of the organism to conditions that, either consciously or unconsciously, are experienced as noxious" (Donovan, 1987, p. 259).

Up to this point, we have been suggesting ways of preventing conditions that are noxious, *i.e.* deadly. However, it is impossible to eliminate all noxious conditions in the workplace: the stress of deadlines; of working with supervisees who are hostile and angry; of having to dismiss a worker because of budgetary restraints; of having to deal with upper administration, which might not be responsive to the needs of workers despite our best efforts to communicate effectively and create the cooperative atmosphere portrayed above. We still have an opportunity to chose an alternative to the well known "fight or flight" syndrome, in the face of unavoidable stressors. The alternative is coping and connecting: coping by utilizing behaviors that protect us from psychological harm, (Donovan, 1987) and connecting to the people or causes of stress in the workplace.

Stress has become the fashionable "disease" of our time. The list of approaches to treating and preventing stress, under the stress management label is wide: "...massage, exercise, nutrition, progressive relaxation, meditation, biofeedback, social skills training, and stress inoculation training are only a few of the better known ones" (Roskies, 1987, p. 27).

How stress is perceived will determine the type of treatment or combinations of treatments that are used. Whether the problem in the workplace needs to be treated by improving the individual's coping skills, or by putting pressure on the administration to change aversive working conditions is a matter of judgement and strategy.

We do not have the luxury in this chapter to describe, or evaluate all of the different stress management approaches. One approach an agency might consider is Donald Meichenbaum's (1985) "Stress Inoculation Training" (SIT). SIT has wide applicability and has been demonstrated to be effective with a variety of populations (Roskies, 1987). Although SIT includes deep relaxation exercises, progressive relaxation, imagery and preparation for provocations, perhaps the most familiar part to many supervisors is the

cognitive restructuring, the "self-talk" that has its underpinnings in Rational Emotional Therapy (Ellis, 1962).

Basically SIT teaches that it is not (A) the activating event, (worker is late for appointment) that causes (C) the consequences, stressful feelings or behaviors, but it is (B), what we believe, the irrational belief, about the activating event, (she is never on time, she's always late) that causes the feelings and stress. If the supervisor has a tendency to awfulize, catastrophize and horriblize about the activating event (A), ("I can't stand it when he's late, she's late just to aggravate me"); if he/she gets into never-always thinking and lays "shoulds," "musts" on self and others, it is predictable how he/she will react to the event. The strategy for alleviating the stress is (D) disputing the irrational beliefs about the event with "self-talk"; ("He's not always late, as a matter of fact, he's on time most of the time. He doesn't have to be perfect. I would expect that he be on time most of the time.") Supervisors who are able to go through this process, can view the activating event more realistically and are more likely to respond and not react. Although the stressful events still happen, one is able to respond rather than react and better able more effectively to carry out responsibilities, while maintaining one's own health in the face of everyday stressors.

CONCLUSIONS

The role of supervisor requires a wide range of interpersonal skills, in creating a cooperative atmosphere, providing constructive feedback, handling complaints and criticisms, negotiating and bargaining, and monitoring caseloads and contracts. The supervisor also must provide linkage to upper administration, and at times advocate for change.

This chapter has suggested an assertive model of supervision which, at first, might appear to be contrary to Native American values. However, with further exploration, it has become clear that this model provides a framework, which enables the supervisor to demonstrate respect and esteem for workers and enhance the service given to clients.

While humanizing the workplace and at times being torn between direct service workers and upper administration, the supervisor needs to learn to nurture her/himself. This chapter has briefly described the main component of "Stress Inoculation Training", cognitive restructuring, and suggests that the other components of SIT be explored further for their application in managing worker and supervisor stress.

CURRICULUM OUTLINE FOR SUPERVISION

I. Introduction

- A. Focus of Chapter
  - 1. Goals and Objectives
- B. History and Themes
  - 1. Definition

II. Overview of Supervisory Responsibilities

- A. Cooperation vs. Competition
- B. Creating an Atmosphere for Cooperation
- C. Mutual Respect / Sensitivity
- D. Cultural / Family Values and Cooperation

III. Leadership Styles

- A. Use of Authority
- B. Power vs. Authority
- C. Authority and Values
- D. Assertive vs. Non-assertive
- E. DESC Script
- F. Feedback

IV. Types of Supervision

- A. Individual
- B. Group / Peer

V. Becoming a Supervisor

- A. From Staff Person to Supervisor
- B. New Supervisor, New Agency
- C. New Supervisor, Experienced Workers

VI. Managing the Stress of Supervision

- A. The Realities of Stress
- B. Stress Inoculation Training (SIT)

VII. Summary and Conclusions

- A. Pre-Post Test
- B. References

SUPERVISION
PRE-POST TEST

1. Identify three themes that have been part of the development of supervision in social work practice.

2 What factors distinguish a cooperative atmosphere in the workplace from a competitive atmosphere?

3. Identify the major cultural issues that contribute to a cooperative atmosphere in the workplace.

4. What are the characteristics of a natural helper that contribute to trust and cooperation in the workplace?

5. Identify the major differences between a non-assertive and assertive approach to supervision.

6. What factors suggest that an assertive approach is compatible for working with Native American supervisees?

7. Describe how you might apply the DESC SCRIPT to your work with a supervisee.

8. Describe the utility of peer supervision.

9. What issues might arise when a person is promoted to the position of supervisor over former peers?

10. Apply the "self-talk" component from Stress Inoculation Training to a supervisee / supervisor interaction.

GUIDELINES FOR EXPECTED OUTCOMES
SUPERVISION

I. DEVELOPMENT OF SUPERVISION IN SOCIAL WORK

Desired Outcome: Learners will improve their knowledge of the history and development of supervision in the social work field.

Learned Competencies Leading to Desired Outcomes:

1. Ability to trace the history of supervision.
2. Ability to identify three themes in the development of supervision.
3. Ability to define supervision.

II. OVERVIEW OF SUPERVISORY RESPONSIBILITIES

Desired Outcome: Learners will improve their ability to create a cooperative atmosphere in the workplace.

Learned Competencies Leading to Desired Outcome:

1. Ability to distinguish between a cooperative and competitive atmosphere.
2. Ability to identify cultural issues that contribute to a cooperative atmosphere.
3. Ability to identify characteristics of a "Natural Helper" that contribute to trust and cooperation.

III. LEADERSHIP STYLES

Desired Outcome: Learners will improve their ability to appropriately use authority.

Learned Competencies Leading to Desired Outcome:

1. Ability to distinguish between a non-assertive and assertive approach to supervision.
2. Ability to identify the steps for implementing an assertive approach to supervision.
3. Ability to demonstrate skill in applying the DESC Script.
4. Ability to Identify the assumptions underlying an assertive approach to supervision.
5. Ability to demonstrate application of positive approaches in interactions with supervisee.
6. Ability to write a memo to supervisees pointing out areas that need to be changed.
7. Ability to define authority and to demonstrate application for the purpose of asisting supervisees in setting appropriate objectives for their work with clients.
8. Ability to provide appropriate feedback to supervisees.

IV. TYPES OF SUPERVISION

Desired Outcome: Learners will improve their knowledge of different types of supervision.

Learned Competencies Leading to Desired Outcome

1. Ability to identify three types of supervision.
2. Ability to determine the most appropriate approach of supervision for inexperienced and experienced workers.
3. Ability to define and describe peer supervision.
4. Ability to identify the benefits of peer supervision.

V. BECOMING A SUPERVISOR

Desired Outcome: Learners will improve their knowledge of the process of becoming a supervisor and acquire skills for assuming the role.

Learned Competencies Leading to Desired Outcome:

1. Ability to identify and determine most effective strategies for moving from a staff person to a supervisor.
2. Ability to deal with former peers whom you now supervise.
3. Ability to integrate into new agency as a beginning supervisor
4. Ability to work effectively with both new and experienced workers.

VI. MANAGING THE STRESS OF SUPERVISION

Desired Outcome: Learners will improve their ability to deal with the stress associated with being a supervisor.

Learned Competencies Leading to Desired Outcome:

1. Ability to recognize and acknowledge stress as a reality in the workplace.
2. Ability to identify possible predictable stressors.
3. Ability to identify the components of stress inoculation training.
4. Ability to apply the "self-talk" component of stress inoculation training to situations that are likely to occur between supervisor and supervisee.

END NOTES

Bower, S., and G. Bower (1976) *Asserting Yourself.* Reading, Mass., Addison-Wesley.

Butler, B. (1990) "Job Satisfaction: Management's Continuing Challenge." *Social Work*, 35, 112-120.

Cross, T. (1986) "Drawing on Cultural Tradition in Indian Child Welfare Practice." *Social Casework*, 67, 283-289.

Conway, P. et al. (1987) "A Model of Job Facet Satisfaction." *Journal of Social Work Education*, 23, 48-57.

Donavan, R. (1987) "Stress in the Workplace: A Framework for Research and Practice." *Social Casework*, 68, 259-266.

Dubray, W.H. (1985) "American Indian Values: Critical Factor in Casework." *Social Casework*. 66, 30-37.

Ellis, A. (1962) *Reason and Emotion in Psychotherapy.* New York, NY, Lyle Stuart.

Drury, S. (1984) *Assertive Supervision: Building Involved Teamwork.* Champaign, IL, Research Press.

Fausel, D. (1988) "Helping the Helper Heal: Co-Dependency in Helping Professionals." *Journal of Independent Social Work*, 3, 35-45.

Froland, C. (1981) *Helping Networks and Human Services.* Beverly Hills CA, Sage Publications.

Harkness, D. and J. Poertner (1989) "Research and Social Work Supervision: A Conceptual Review." *Social Work* , 34, 115-119.

Joe, J. (1989) "Values", *Collaboration tha Key*, (Eds.) E. Gonzalez-Santin and A. Lewis, Tempe, AZ, Arizona State University.

Gambrill, E. and T. Stein (1983) *Supervision, A Decision Making Approach.* Beverly Hills CA, Sage Publications.

Glickin, V. (1980) "Enhancing Work for Professional Social Workers." *Administration in Social Work*, 4, 61-74.

Kadushin, A. (1976) *Supervision in Social Work*, New York, Columbia University Press.

Kadushin, A. (1985) *Supervision in Social Work*, (2nd ed.) New York, Columbia University Press.

Marks, J. and D. Hixon (1986) "Training Agency Staff Through Peer Group Supervision." *Social Casework*. 67- 418-423.

Meichenbaum D. (1985) *Stress Inoculation Training.* New York, NY, Pergamon Press.

Middleman, R. and G. Rhodes (1985) *Competent Supervision: Making Imaginative Judgements.* Englewood Cliffs, NJ, Prentice-Hall.

Miller, I. (1987) "Supervision in Social Work." *Encyclopedia of Social Work*. 18th Edition, Silver Springs MD, National Association of Social Workers, 748-756.

Morrison, P. (1980) *Effective Feedback*. Unpublished mimeographed material, Tempe, AZ, Arizona State University, School of Social Work.

Munson, C. (1983) *An Introduction to Clinical Social Work Supervision.* New York, Haworth Press.

Larsen, Earnie (1985) *Stage II Recovery: Life Beyond Addiction.* San Francisco, CA, Harper & Row Publishers.

Palmer, S. (1980) "Authority: An Essential Part of Practice." *Social Work*. 28, 120-126.

Roskies, E. (1987) *Stress Management for the Healthy Type A.* New York, NY, Guilford Press.

Schaef, A. and D. Fausel (1988) *The Addictive Organization.* San Francisco, CA, Harper & Row.

Shulman, L. and E. Robinson, and A. Lucky (1981) *A Study of Supervision Skill: Context Content and Process.* Unpublished report. Vancouver, B.C., University of British Columbia, School of Social Work.

Shulman, L. (1982) *Skills of Supervision and Management.* Itasca, IL, F. E. Peacock Publishers, Inc.

Sze, W. and B. Ivker (1986) "Stress in Social Workers: The Impact of Setting and Role." *Social Casework*. 67, 41-48

Weissman, H. and I. Epstein, A. Savage, (1983) *Agency-Based Social Work: Neglected Aspects of Clinical Practice.* Philadelphia, PA, Temple University Press.

Woititz, J. (1987) *Home Away from Home.* Pompano Beach FL, Health Communications Inc.